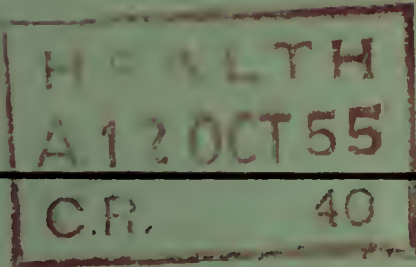


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**SPENBOROUGH URBAN DISTRICT  
COUNCIL**



**ANNUAL REPORT**

**OF THE  
MEDICAL OFFICER OF HEALTH**

**For the Year**

**1 9 5 4**

**WILLIAM MASON DOUGLAS, M.B. Ch.B., D.P.H.**

**Medical Officer of Health**



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COUNCIL**



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# Urban District of Spenborough

## Constitution 1954—55

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Chairman : Councillor A. R. STOCKHILL, J.P.

Vice- Chairman : Councillor H. de LACY TAYLOR.

Councillor	Miss A. BLACKBURN	Councillor	G. BLACKBURN, J.P.
„	J. E. BROWN	„	S. R. ELLIS
„	B. FARROW	„	P. FAWCETT
„	J. GREENALD	„	Mrs. A. HOLROYD
„	A. JONES	„	J. G. KENT
„	F. KIRKMAN	„	R. LEA
„	D. NAYLOR	„	H. OXNARD
„	D. PAGE	„	H. ROBINSON
„	F. A. C. SCHOFIELD	„	Mrs. I. SHARPE
„	T. W. SHAW, J.P.	„	H. SIDDLE
„	J. E. SLADDIN	„	A. W. SMITH
„	W. STILLINGFLEET	„	A. R. STOCKHILL
„	R. STOCKS	„	H. de LACY TAYLOR
„	W. E. TETLEY, J.P.	„	Mrs. E. WHITELEY
„	F. E. WILDE	„	H. WRAY

### HEALTH COMMITTEE 1954-55.

Chairman : Councillor D. PAGE.

Vice-Chairman : Councillor A. W. SMITH.

The Chairman of the Council : Councillor A. R. STOCKHILL, J.P.

Councillor	Miss A. BLACKBURN	Councillor	B. FARROW
„	Mrs. A. HOLROYD	„	D. NAYLOR
„	H. SIDDLE	„	Mrs. I. SHARPE
„	W. STILLINGFLEET	„	R. STOCKS

July, 1955.

TO THE CHAIRMAN AND MEMBERS OF THE PUBLIC HEALTH COMMITTEE,  
SPENBOROUGH URBAN DISTRICT COUNCIL.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit to you my Annual Report relating to the Urban District of Spenborough, and to the work of the Health Department for the year 1954. The custom has been repeated of presenting a report which includes a description of the County Council Public Health Services operating under my executive direction in Spenborough, as this gives a comprehensive picture of what is essentially one preventive health service, in spite of the duality of responsibility.

The vital statistics for this year do not make cheerful reading. The birth rate is down again compared with last year (12.1 against 13.8 live births per thousand of population), and is in fact the lowest figure recorded since 1937. This decline has been a definite trend in Spenborough during the past seven years and the rate is now considerably lower than the average rates for the country or for the administrative county.

With the death rate remaining fairly steady at 13.8 per thousand population (last year 13.4) we had this year a situation in which there was a natural decrease of 62 in the population being the number by which the deaths exceeded the births. This is, however, not the general experience throughout the country, which is perhaps fortunate, and whether locally this state of affairs will continue remains to be seen. Speculation as to its cause would cover a wide field indeed and probably raise no factors which are not discounted by experience in other districts.

The infant mortality rate, 38.1 deaths of infants under one year of age per thousand live births, and the stillbirth rate 26.2 stillbirths per thousand total births also compare very unfavourably with last year's figures which were 26.5 and 21.2 respectively. This, one trusts, is largely due to chance occurrences taken in conjunction with a falling birthrate. Seven of the infant deaths were due to abnormality of the infant at birth and three, possibly four, to bronchitis which is rather more than one has come to expect in this area. One death in an infant of four months attributed to poliomyelitis in association with bronchitis, the diagnosis being made post mortem, must be regarded with some doubt as there were no other suspected cases in the district at that time.

Of the twelve stillbirths eleven took place in hospital and were in several cases associated with abnormality of the unborn child. Two of these patients had attended the Local Authority Ante-Natal Clinic.



The general mortality tables show that of the 508 deaths 70% occurred after the age of 65 years and 40% over 75 years of age. The commonest causes of death were heart disease (89 cases), coronary disease (85 cases), cancer (81 cases) and cerebral haemorrhage and thrombosis (72 cases). These afflictions though varying locally from year to year are in the main representative of the general experience in similar areas.

Certain diseases, however, such as cancer, coronary disease and poliomyelitis, have been much in the public mind and in the press of recent years. One cannot at times escape the impression that much of the publicity given to disease in press, wireless, and perhaps particularly on television, is not altogether a good thing. Often presented with an eye to drama and sensationalism, such material can greatly upset the many people who are unable to form a balanced judgement in these matters, in a manner somewhat analagous to that in which the horror comic is alleged to affect certain adolescent minds. Such is the desire for health today that fear of disease tends to drive from many the joy of living. Most doctors would, I think, agree that hypochondria and psychoneurosis is an affliction looming larger in medical practice.

I cannot pass from the mortality tables without referring to two deaths from causes which have become rare in our community. One is a maternal death associated with child birth which occurred in hospital, the first such tragedy for four years. The second is the death of a child reported due to diphtheria, a disease of which there has not even been a single notification here since 1948. The child, one of a large family, had not previously been immunised against the disease, and other parents should take warning from this happening.

With regard to infectious disease there were no heavy epidemics, but chicken pox and scarlet fever, both mainly of a mild nature, were prevalent. Whooping cough was also prevalent among children, particularly during the first half of the year, and in only four cases had the children been previously immunised against the disease. In each of these four cases the disease was greatly modified. The whooping cough notifications showed a decline however from previous years and it may be that the process of immunisation is beginning to have an apparent effect on the numbers.

Immunisation against both diphtheria and whooping cough was moderately well maintained, due largely to the enthusiastic action of the health visitors in encouraging the use of these procedures. There is considerable scope for improvement in relation to the number of young children who ought to be protected against both these diseases and this would be greatly facilitated by the use of a suitable preparation combining both diphtheria and whooping cough fractions. Such preparations are available and indeed in use in several other authorities, but not yet approved in the West Riding scheme. The prime factor however, must still be held to be the negligence or

indifference of too many parents. Vaccination against smallpox in infancy, in spite of all endeavour, has again sunk to its former low level now that the smallpox outbreak in certain parts of the county last year has receded from the public consciousness. The Ministry of Health in a memorandum has drawn attention to the desirability of maintaining a high state of vaccination among children, and among employees in the cotton industry up to and including the carding stage. I cannot say that I feel confident of any marked response from the public unless smallpox reappears in the area and then, unfortunately, it may be too late.

I have included a small paragraph on each facet of the personal health services operating in Spenborough and taken together they show, as I believe, a comprehensive service of care for the community and particularly for future generations in a preventive sense. One cannot but be impressed with the high standard of physical fitness and well being which is common to the vast majority of the children of today. At the same time one must also surely be impressed by this service of ours which does its best to ensure that the community is best fitted to care for itself now and in the future, and which does so much to improve the outlook for those suffering from defect in their earlier years. Such defects can often be remedied, and where this is not possible the effects can be mitigated.

In one comparatively small matter, I am highly pleased that the condition of verminous heads among school children has shown a marked decline this year, and hope that this trend may continue. It is an important indication of the standard of child care in the home. Compared with last year 138 fewer children were found to be infested and the number of instances reduced from 1,044 to 594.

The educational nature of much public health work is given further emphasis by the scope of the syllabus of lectures given by the school nurses at the secondary modern school, which I regard as an important development in this field.

Reference must also be made to the closing during the year of the Day Nursery of Moored. This was partly due to the desire of the firm from whom the land was requisitioned, to regain possession of the land, and partly one must admit because such closure was in general conformity with the County Council's policy. Set up by the Spenborough Council in 1943 under war-time arrangements this nursery has proved during the years a great help in dealing with many socio-medical difficulties. It is also undeniable that particularly during latter years it had the effect of subsidising a number of individuals at the expense of the general body of the ratepayers. I must confess that I was sorry to see it go and particularly to see the disbandment of a loyal and efficient staff under Mrs. Brooke, the Matron of the nursery from its inception, upon whom I could invariably rely for loyal co-operation and efficient and kindly management. Upon the closure of the nursery arrangements were made for the admission of six children in necessitous circumstances to the Day Nursery at Heckmondwike.



I have said before, and repeat, that it is a matter of personal regret to me that a formula has not been found or adopted for the delegation of responsibility to local bodies, preferably local councils, for these County Council health services. Local interest which is stimulated by responsibility leads to critical appraisal of the service by local representatives and brings to light much incidental detail which is so helpful in attaining high efficiency. It is also a stimulant to the staff who become aware of their special place in the community if their immediate employers are able to interest themselves in the work of the individual. One appreciates well the difficulties of delegation but it cannot be pretended that this local interest to which I have referred has been or can be maintained without ample delegation of authority.

With regard to what may be called the environmental hygiene aspect of Public Health it will be seen that once again a large amount of routine work has been carried out and this is itemised under various headings in the report. Such work which is often taken for granted and receives little acclaim, is at the very foundation of Public Health practice, and without keen and enthusiastic application to it there is no doubt whatever that both the health of the community and its standard of living and amenity would greatly suffer.

Progress in eradicating privy closets which by today's standards can only be regarded as an abomination is now necessarily slow, and only five conversions to the water carriage system were accomplished during the year. However, it is to be expected that when the extensions to the sewerage system in the Hartshead area are completed during the ensuing year further conversions will take place there. In the absence of this extension only some forty-six remained which were capable of conversion.

We make little or no progress either in the reduction of atmospheric pollution, and it will be seen that somewhere between 125 and 200 tons of solids alone, mostly in the form of soot, fell over each square mile of Spenborough last year. This is hardly to be wondered at in days of full employment, with a generally declining quality of coal, and in the absence of any strong national policy to tackle the matter. A Clean Air Bill is promised—what its provisions will be we can only surmise—but it can only succeed if it is allied to a firm national policy on fuel and if it reveals an intention seriously and immediately to grapple with this great menace to health which, I believe, Local Authorities are unable to tackle in any way effectively without the lead and the support of Parliament.

Milk supplies within the district have been tested regularly for purity and while these have on the whole proved satisfactory this year it is gratifying that as from the 1st October, 1954, Spenborough became a designated area under the appropriate legislation in which only tuberculin tested milk or milk rendered safe by pasteurisation or other heat treatment may be sold. One more safeguard to the public health has been applied.

With the freeing of the meat trade from Government control, the Council, in accordance with the provisions of the Slaughter Houses Act 1954 considered the condition of the private slaughter houses in the area and the condition of these taken in conjunction with the facilities available at the Council's abattoir led to the decision to prohibit the use of private slaughter houses in the district. This resolution was subsequently confirmed by the Ministry of Food. I regard this as a highly desirable practice but it also places an obligation on the Council to see that the best possible conditions prevail at the public abattoir and this is not so at the present time. In spite of many difficulties, however, there has been on the whole very good co-operation with the traders using the premises and tolerance on both sides has gone a good way to easing some of the inevitable problems. For their part the Health Committee have been well aware of the shortcomings of the abattoir, which had not previously been remedied because of restriction on expenditure and materials in the post war era. Plans are, however, in process of drafting and costing for submission to the Minister and it is the Committee's intention to provide first class facilities to the limit of their abilities.

With regard to housing it is encouraging to note that 176 new houses were completed by the Council and a further 33 by private enterprise during the year. It was even more encouraging to find the Housing Committee in sympathy with an increasing tempo of slum clearance and the opportunity was taken to represent 107 houses as unfit for human habitation. Action has already been taken to re-house a number of tenants from these premises and this will progressively continue, leading up to the subsequent demolition of the property.

The Housing Committee having decided upon an allocation of 75% of Council house lettings to deal with slum clearance, it has been decided to aim at the clearance of some 2,000 houses within the next ten years. This should be well within the compass of the Council's capabilities and represents, as I believe, a realistic expectation of the minimum building allocation which ought to be made to Spenborough, even on a national building programme of under 200,000 houses per year. There are very many problems inherent in a slum clearance programme just as there are in the question of upgrading substandard property which falls short of slum criteria, and it has to be accepted that in securing the necessary benefit to the community individual hardship or inconvenience may on occasion be caused, to what one hopes will prove to be a small number of individuals. Nothing which one can foresee is likely to raise the standards of living and the health of the community within the next decade, to anything like the same extent as a vigorous policy of slum eradication. It is hoped too, that the grants which the Council may make to property owners will encourage many to raise the amenity of suitable property near to what one expects to find in a modern house, which is after all what people are entitled to have today.



Since the Health Committee assumed responsibility for the provision and maintenance of public conveniences in the district they have done their best to bring these up to a high standard of cleanliness and amenity. Their efforts have to some extent been thwarted by the almost unbelievable misuse of these and the wanton damage caused by certain sections of the community. These irresponsible elements are not easily brought to justice and the public, both individually and collectively, must realise that they have a prime responsibility in the maintenance of high social standards. Four new public conveniences are planned for the district and it is hoped that work on some of these will commence in the coming year.

I am very glad once again to record my grateful appreciation of the ready co-operation which has been forthcoming to myself and the Public Health staff by professional colleagues in general practice and in the Hospital Service, and which we greatly value. Likewise the head teachers and staffs of schools with whom we are in almost daily contact. Indeed I cannot say that any major difficulty has arisen during the year in connection with this matter of co-operation with others which is so important to our work. For that I am largely indebted to an enthusiastic, able and tolerant staff for whom I entertain a high regard.

The section of the report relating to the work of the sanitary inspectors has been compiled by Mr. Templeman, the Chief Sanitary Inspector, to whom once again my thanks are due for this and for his continued loyal support at all times.

In conclusion, Mr. Chairman, may I thank you and the members of the Health Committee for the courteous reception and helpful support which have been accorded to me throughout the year.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

W. M. DOUGLAS,  
Medical Officer of Health,  
Divisional Medical Officer.

## SPENBOROUGH URBAN DISTRICT.

Area of district in acres at 1951 census	...	...	...	8,253
Population at 1951 census	...	...	...	36,977
Number of inhabited houses at 1951 census	...	...	...	12,723
Average number of persons per room at 1951 census	...	...	...	1.29
Number of families at 1951 census	...	...	...	12,381

### Statistical Summary of the area for 1954 in comparison with 1953.

	1953	1954
Area of the district in acres	8,253	8,253
Estimated population (mid-year)	36,760	36,760
Average number of persons per acre	4.5	4.5
Estimated number of dwellinghouses	12,920	13,047
Average number of persons per house	2.8	2.8
Rateable value at 1st April	£184,765	£187,441
Product of Penny Rate (estimate)	£715	£735
Crude Death Rate per 1,000 estimated population	13.4	13.8
Comparability Factor	0.96	0.96
Standardised Death Rate	12.8	13.3
Crude Birth Rate per 1,000 estimated population	13.8	12.1
Comparability Factor	1.02	1.05
Standardised Birth Rate	14.1	12.7
Still-birth Rate per 1,000 total live and still-births	21.2	26.2
Infant Mortality Rate per 1,000 live births	25.6	38.1
Maternal Mortality Rate	Nil	2.2

## POPULATION AND SOCIAL CONDITIONS.

The population of the original Urban District of Spenborough at the 1931 census was 30,963, and the population of Birkenshaw, Hunsworth and Hartshead, which were added to the original Urban District in 1937, was 5,066, giving a total population at that time of 36,029. Provisional figures for the 1951 census show a population of 36,977, an increase of 948 in fourteen years. The Registrar General's estimate of the population of the Urban District of Spenborough at the middle of 1954 is 36,760, and this figure is used throughout this report in calculating rates.

The district, although mainly industrial in nature, contains much open space and a fair amount of agricultural land. There are over four hundred factories in the district but only eighty-eight of these employ more than twenty persons. Although processes connected with the woollen textile industry are the predominant industry a great diversity of manufacture is carried on. There is the advantage in this that the whole community can not be affected by recession in any one branch of industry. The small size of many of the factories renders very difficult the establishment of an effective industrial medical service, but within recent years development of welfare schemes, canteens, etc., in the larger factories has proceeded in a very satisfactory manner. Owing to the way in which the Urban District was formed by the amalgamation of a number of pre-existing townships population has tended to be concentrated in comparatively small aggregates rather than spread evenly throughout the district, but this is to some extent disappearing owing to the movement within the district of large sections of the community into new housing estates.

A big problem in this area is the shortage of labour and during the year full employment has continued in nearly all the principal industries. Present indications are that this position will be sustained. Labour demands are mainly in building, engineering, textiles and transport. At the end of the year the number of wholly unemployed on the register was thirty and of that number twelve men and three women were registered disabled persons and the remainder had only been unemployed for less than two weeks. The total number of registered disabled persons on the unemployment register was 759 and all but 15 were in employment. It will be seen therefore that local industry is playing its full part in employing their quota of disabled persons under the Disabled Persons (Employment) Act, 1944.

I am indebted to the Manager of the Spen Valley Employment Exchange for the information regarding employment in the district.



## VITAL STATISTICS FOR THE YEAR 1954.

### Live Births. (Registered)

					Males	Females	Total
Legitimate	...	...	...	...	226	205	431
Illegitimate	...	...	...	...	5	10	15
Total					231	215	446

Birth rate per 1,000 estimated population : 12·1.

### Live and Stillbirths Notified in the District.

Ward					Males	Females	Total
Cleckheaton—East	...	...	...	...	2	1	3
Cleckheaton—West	...	...	...	...	3	7	10
Hightown and Hartshead	...	...	...	...	23	13	36
Birkenshaw	...	...	...	...	2	3	5
Gomersal	...	...	...	...	6	7	13
Millbridge	...	...	...	...	1	4	5
Scholes	...	...	...	...	2	9	11
Spen and Littleton	...	...	...	...	5	4	9
Oakenshaw and Hunsworth	...	...	...	...	1	—	1
Roberttown and Norristhorpe	...	...	...	...	4	4	8
Total					49	52	101

### Births Transferable to the District.

Hospitals	...	...	...	...	...	120
Maternity Homes	...	...	...	...	...	257
Nursing Homes	...	...	...	...	...	9
Total						386

### Stillbirths.

					Males	Females	Total
Legitimate	...	...	...	...	6	6	12
Illegitimate	...	...	...	...	—	—	—
Total					6	6	12

Stillbirth rate per 1,000 total live and still-births : 26·2.



The birth rate has shown a further downward trend from last year and is lower than the average rate for the country and for the administrative county as is shown in the table of comparative statistics. The Registrar General supplies a "comparability factor." In the case of Spenborough, for births, this is 1·05, and multiplying our crude birth rate by this figure we obtain a standardised birth rate of 12·7, which would represent the birth rate for Spenborough if its population had the same age and sex constitution as that of the country as a whole.

Approximately 85% of all confinements took place in hospital or maternity homes, and this is substantially greater provision than is required on social or medical grounds. The reason for this is to be found almost entirely in the propinquity of Crossley Maternity Home, and of course the fact that general medical practitioners can attend their own patients in this Home under conditions of ideal convenience does not lead to the encouragement of domiciliary confinements.

There were twelve stillbirths notified during the year giving a rate of 26·2 per one thousand live and stillbirths. All but one of these occurred in hospital and all but two mothers had received ante-natal care from general practitioners and at hospital clinics. It is extremely unlikely that any of these could have been prevented.

#### Deaths.

		Males	Females	Total
Total Deaths assigned to district	...	240	268	508
Deaths registered in the district	...	174	192	366
Deaths transferable to the district	...	73	80	153
Deaths transferable from the district	...	7	4	11
Death Rate per 1,000 estimated population				13·8
Standardised Death Rate	... ..			13·3
Deaths from puerperal causes	... ..			1

#### Deaths of Infants under 1 year :—

					Males	Females	Total
Legitimate	...	...	...	...	9	7	16
Illegitimate	...	...	...	...	1	—	1
					10	7	17

Death rate per 1,000 live births	...	...	...	...	...	38·1
Death rate of legitimate infants per 1,000 legitimate live births						37·1

There were 508 deaths assigned to the district giving a crude death rate of 13·8. The Registrar General's "comparability factor" for deaths is 0·96 and multiplying the crude death rate by this factor we obtain 13·3 which would represent the death rate for Spenborough if its population had the same age and sex constitution as that of the country as a whole. In this year therefore there was a natural decrease of 62 in the population. Compared with last year there was an increase in the number of deaths due to coronary disease and cancer, and the commonest cause of death was heart disease which was recorded in 89 instances. Of the 508 deaths 70% occurred after the age of 65 years and 40% over 75 years of age.

Seventeen deaths occurred in infants aged under one year due principally to abnormal conditions present in the child at birth, in four cases due to premature birth and in three cases due to bronchitis. Bronchitis had not in recent years proved to be a common cause of infant death in Spenborough and one hopes that it is not likely to remain so. One child was admitted to hospital with a diagnosis of acute bronchitis and died shortly after admission. The post mortem examination revealed degenerative changes in the central nervous system and this appearance was ascribed to acute poliomyelitis. As there were no other cases or suspected cases in or around the district at this time, and the infant had virtually been confined to his home for some weeks previously this diagnosis must surely be regarded as presumptive.

There was one death of an expectant mother associated with child birth during the year. In this case death was ascribed to surgical shock due to operative procedures associated with difficulty in delivery.

# CAUSES OF AND AGES AT DEATH DURING THE YEAR 1954.

	All Ages	Under 1 year	1—4	5—14	15—24	25—44	45—64	65—74	75 and Over	Males	Females	Deaths in Institutions
Tuberculosis respiratory ...	8				1	1	4	1	1	4	4	4
Tuberculosis other ...	2					1	1			2		1
Syphilitic disease ...	1						1				1	1
Diphtheria ...	1		1								1	1
Acute Poliomyelitis ...	1	1								1		1
Cancer—												
(a) Stomach ...	17						4	10	3	9	8	6
(b) Lung, bronchus ...	15					1	5	5	4	11	4	4
(c) Breast ...	7						3	1	3		7	2
(d) Uterus ...	3						2	1			3	2
(e) Other ...	39					4	10	12	13	16	23	11
Leukaemia ...	2				1		1				2	2
Diabetes ...	4					2	1	1		2	2	1
Vascular lesions of nervous system ...	72	1	1				13	19	38	27	45	
Coronary disease angina ...	85					1	24	30	30	50	35	19
Hypertension with heart disease ...	17						4	5	8	8	9	5
Other heart disease ...	89						13	21	55	35	54	5
Other circulatory disease ...	40					1	9	14	16	15	25	14
Influenza ...	4						1	2	1	1	3	
Pneumonia ...	11						2	3	6	7	4	6
Bronchitis ...	24	3					5	9	7	19	5	2
Other diseases of respiratory system ...	5							4	1	3	2	4
Ulcer of stomach & duodenum ...	1						1			1		1
Gastritis, enteritis & diarrhoea ...	1						1			1		1
Nephritis & nephrosis ...	7							2	5	1	6	1
Hyperplasia of prostate ...	3							1	2	3		
Pregnancy, childbirth, abortion ...	1					1					1	1
Congenital malformation ...	4	4								3	1	2
Other defined & ill defined causes ...	29	8	1	1	1		3	1	14	13	16	19
Motor vehicle accidents ...	3			1		1		1		2	1	
All other accidents ...	10						4	1	5	5	5	4
Suicide ...	2					1	1			1	1	
<b>TOTAL—All Causes ...</b>	<b>508</b>	<b>17</b>	<b>3</b>	<b>2</b>	<b>3</b>	<b>14</b>	<b>113</b>	<b>144</b>	<b>212</b>	<b>240</b>	<b>268</b>	<b>120</b>



# CAUSES OF INFANTILE MORTALITY IN SPENBOROUGH URBAN DISTRICT, 1954

Cause of Death	Under 1 day	1 day	2 days	3 days	4 days	5 days	6 days	7—13 days	14—20 days	21—28 days	28 days—2 months	3 months	4 months	5 months	6 months	7 months	8 months	9 months	10 months	11 months	12 months	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	In First Year
Congenital Defects			1		1						1		1									2				5
Accidental asphyxia											1											1				1
Prematurity	2				1				1		1											1		2		4
Atelectasis				2																		1		1		2
Intra Cranial haemorrhage	1														1					1		1				1
Poliomyelitis										1			1									1				1
Bronchitis...																						1				3
TOTALS	3		1	2	2				1	1	2		2		1	1				1		6	3	7	1	17



**Birth and Mortality Rates for 1954 for the West Riding Administrative  
County and England and Wales.**

	Aggregate of U.D's.	Aggregate of R.D's.	Adminis- trative County	England & Wales	Spen- borough
Crude Birth ... ..	14.7	16.3	15.1	15.2	12.1
Adjusted Birth ...	14.8	16.4	15.3	—	12.7
Crude Death ... ..	12.7	9.9	11.9	11.3	13.8
Adjusted Death ...	12.8	11.4	12.5	—	13.3
Tuberculosis, Respiratory ... ..	0.18	0.12	0.16	0.16	0.22
Tuberculosis, Other ...	0.01	0.02	0.02	0.02	0.05
Tuberculosis, All Forms	0.19	0.14	0.18	0.18	0.27
Cancer ... ..	2.12	1.70	2.01	2.04	2.20
Vascular Lesions of the Nervous System ...	2.03	1.33	1.84	*	1.96
Heart and Circulatory	4.88	3.64	4.54	*	6.28
Respiratory Diseases ...	1.27	1.08	1.22	*	0.92
Maternal Mortality ...	0.80	1.10	0.89	0.69	2.18
Infant Mortality ...	28.3	27.2	28.0	25.5	38.1
Neo-Natal Mortality ...	18.6	17.4	18.3	17.7	22.4
Stillbirth ... ..	26.6	24.2	25.9	23.4	26.2

\*Figures not available.

The Infant and Neo-natal Mortality Rates are per 1,000 live births.

The Maternal Mortality and Stillbirth Rates are per 1,000 live and stillbirths.

The remaining rates are per 1,000 estimated home population.

## PREMATURE INFANTS.

Given below are details of live premature infants born at home and in hospital :—

- (i) The number of premature babies notified during the year whose mothers are normally resident in the Council's area 37
- (ii) The total number of premature babies notified during the year that were born :—
- |                                 |     |     |     |     |     |     |     |    |
|---------------------------------|-----|-----|-----|-----|-----|-----|-----|----|
| (a) at home                     | ... | ... | ... | ... | ... | ... | ... | 6  |
| (b) in hospital or nursing home | ... | ... | ... | ... | ... | ... | ... | 31 |
- (iii) The number of those born at home :—
- |  |     |     |     |   |
|--|-----|-----|-----|---|
| (a) who were nursed entirely at home     | ... | ... | ... | 5 |
| (b) who died during the first 24 hours   | ... | ... | ... | 0 |
| (c) who survived at the end of one month | ... | ... | ... | 6 |
- (iv) The number of those born in hospital or nursing home :—
- |  |     |     |     |    |
|--|-----|-----|-----|----|
| (a) who died within the first 24 hours   | ... | ... | ... | 2  |
| (b) who survived at the end of one month | ... | ... | ... | 26 |

## TABLE SHOWING BIRTH WEIGHTS OF PREMATURE INFANTS.

### Domiciliary Confinements.

Birth Weight lbs.    ozs.	No. of Infants	No. of Infants who survived		
		24 hours	2-7 days	1 month
3    12	1	1	1	1
4    12	1	1	1	1
5    —	1	1	1	1
5    4	2	2	2	2
5    8	1	1	1	1
Totals	6	6	6	6

**Institutional Confinements.**

Birth Weight lbs.    ozs.	No. of Infants	No. of Infants who survived		
		24 hours	2-7 days	1 month
1      4	1	—	—	—
1      9	1	1	—	—
3      4	2	2	2	1
3      6	2	1	1	1
3     13	1	1	1	1
4      —	1	1	1	1
4      2	1	1	1	1
4      4	1	1	1	1
4      8	1	1	1	1
4     10	1	1	1	1
4     11	1	1	1	1
4     14	2	2	2	2
4     15	1	1	1	1
5      —	3	3	3	3
5      1	2	2	2	2
5      3	1	1	1	1
5      4	2	2	2	2
5      5	3	3	3	3
5      6	1	1	1	1
5      7	2	2	2	1
5      8	1	1	1	1
Totals	31	29	28	26



## DIPHTHERIA IMMUNISATION.

Diphtheria Immunisation is made available free of charge by arrangements made by the County Council with the general practitioners and through the Public Health Services. Arrangements are made to carry out immunisations at the Child Welfare and School Clinics in the area, and special sessions are held at the schools where sufficient numbers justify it. Approach is made to the parents of every child entering school for the first time and again when they reach the age of ten years in an attempt to raise and maintain the general level of immunity of the school population in particular against diphtheria.

The records which are here presented show that 64% of children under five have been protected against diphtheria and that of the children under fifteen years of age 74% have been so protected, although in the latter case 25% of these have not received a reinforcing injection within the previous five years. In view of the amount of propaganda and the hard work of the Public Health staff in the encouragement of the adoption of this procedure these results cannot be considered to be entirely satisfactory. As fear of the disease has receded from public consciousness it has proved ever harder to attain a high level of immunity among the child population and this situation is fraught with danger.

The following tables show the amount of diphtheria immunisation carried out during the year and the total number of children immunised since 1945 :—

### Primary Injections.

Period	Age at final injection							Total
	Under 1	1	2	3	4	5-9	10-14	
Six months ending 30th June, 1954	129	25	8	5	9	29	8	213
Six months ending 31st December, 1954	23	128	22	4	12	41	11	241
Totals for 1954	152	153	30	9	21	70	19	454

### Re-inforcing Injections.

Period	Age at re-inforcing injection							Total
	Under 1	1	2	3	4	5-9	10-14	
Six months ending 30th June, 1954	—	—	—	—	38	67	37	142
Six months ending 31st December, 1954	—	—	—	—	57	241	243	541
Totals for 1954	—	—	—	—	95	308	280	683



Number of children immunised for the first time during each half-year.

	First half-year	Second half-year	Total
1945	207	218	425
1946	318	219	537
1947	150	390	540
1948	545	269	814
1949	227	250	477
1950	205	157	362
1951	210	174	384
1952	246	165	411
1953	213	220	433
1954	213	241	454

I give below a table showing the numbers and percentages of children who have had a course of immunisation within the last five years separated from those who had a course of immunisation previously :—

Age at 31-12-54 <i>i.e.</i> , Born in year :	Under 1 1954	1—4 1953-1950	5—9 1949-1945	10—14 1944-1940	Under 15 Total
Last complete course of injections (whether primary or booster)					
A. 1950-1954	23 (5%)	1245 (59%)	1803 (58%)	944 (37%)	4015 (49%)
B. 1949 or earlier	—	—	816 (26%)	1273 (50%)	2089 (25%)

### WHOOPING COUGH IMMUNISATION.

The incidence of whooping cough immunisation is disappointing in view of the great suffering which may be spared to many a child by this procedure. There is little doubt that the use of an antigen combining diphtheria with whooping cough would lead to a much higher state of immunity against whooping cough among the child population and it is greatly regretted that the West Riding County Council's scheme does not as yet provide for the use of such material. This appears to be largely due to the reluctance of the Ministry of Health to make such an antigen a free issue to Local Authorities as is at present the case with the diphtheria prophylactic. It is perhaps fair to say, however, that the Ministry are perhaps awaiting the final results of intensive trials which have been conducted by the Medical Research Council on this matter.

**Immunisation carried out during the year.**

Age at final injection	
Under 6 months ...	—
6 months to 1 year	174
1—2 years ...	68
2—3 years ...	10
3—4 years ...	11
	<hr/>
	263
	<hr/>

**Immunisation in relation to Child Population.**

**Number of children at 31st December who had completed a course of immunisation at any time before that date.**

Age at 31/12/54 i.e. born in year	Under 1 1954	1 1953	2 1952	3 1951	4 1950	5 1949	6 1948	Total
Number immunised	34	222	247	125	50	36	13	727

**SMALLPOX VACCINATION.**

The number of persons vaccinated against smallpox during the year has fallen to its usual low level following the very large figures of last year when there was apprehension among many people as a result of cases of smallpox which arose during that year in other textile districts of the West Riding.

The desirability of maintaining a high level of vaccination among young children is continually expounded by the health visitors, general practitioners and Public Health staff but receives little response from the general public in this area.

**Table showing Persons Vaccinated and Re-vaccinated during 1954.**

Age at date of vaccination	Under 1	1	2-4	5-14	15 or over	Total
Number Vaccinated	63	55	7	9	16	150
Number Re-Vaccinated	—	—	—	1	39	40

## INFECTIOUS DISEASES.

There were no serious epidemics of any notifiable disease during the year although chicken pox and scarlet fever were moderately prevalent mostly in a mild form. Ninety-two cases of whooping cough were notified and in only four of these had immunisation against the disease previously been carried out. In each of these four cases enquiry revealed that the symptoms were of an exceptionally mild nature lasting a few days only in comparison with the severe and distressing cough persisting for periods up to six weeks and longer in the unprotected child. Indeed in each of these immunised cases the diagnosis was presumptive only because of the patient's contact with other cases of whooping cough.

The death of one child due to diphtheria was recorded this year and this is the first indication of the presence of the disease in the district since 1948. In this case, a child of three years of age was admitted to hospital suffering from symptoms of cardiac failure after having been under treatment at home for mild symptoms of a sore throat during the previous two to three weeks. The child collapsed and died shortly after admission to hospital and post mortem examination revealed a membranous cast of the respiratory tract including the larynx and trachea and extending into the bronchi, and on culture of this material a virulent strain of diphtheria bacillus was grown. It is remarkable that this child was one of a family of seven children all of whom, except the deceased child, and one other, a boy of nine years, had been immunised against diphtheria in infancy. None of them had suffered from suspicious illness and in no case did nose and throat swabs from the remainder of the family reveal the presence of any diphtheria organisms. The child had had virtually no contact with anyone outside the house for some weeks previously and enquiry failed to reveal the presence of other sore throats in the neighbourhood. On admission to hospital it was not considered that the case clinically resembled diphtheria.



**CASES OF INFECTIOUS DISEASE**  
**occurring in Spenborough Urban District classified according to Areas and Quarters, 1954.**

Disease	Cleckheaton, Hunsworth Oakenshaw and Scholes				Liversedge, Roberttown, Hartshead and Norrithorpe				Gomersal and Birkenshaw				Spenborough			
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Whooping Cough ...	25	11	2	2	14	7	4	2	16	9			55	27	6	4
Measles ...			8	8	1		3	50			1		1		12	61
Chicken Pox ...	12	34	59	6	19	21	20	2	17	8	2	4	48	63	81	22
Scarlet Fever ...	5	3	4	8	10	9	1	6	1	1	1	6	16	13	6	20
Pneumonia ...	8	4	1	4	6		1						14	4	2	4
Erysipelas ...	2		1	1	2				1				5		1	1
Dysentery ...	4	1			3	8	1	1					7	9	1	
Puerperal Pyrexia ...					1								1			
Diphtheria ...					1								1			
Food Poisoning ...											4	3			4	3
<b>TOTALS ...</b>	<b>56</b>	<b>53</b>	<b>75</b>	<b>29</b>	<b>57</b>	<b>45</b>	<b>30</b>	<b>61</b>	<b>35</b>	<b>18</b>	<b>8</b>	<b>26</b>	<b>148</b>	<b>116</b>	<b>113</b>	<b>116</b>

**CASES OF INFECTIOUS DISEASE**  
**occurring in Spenborough Urban District classified according to Age Groups and Wards, 1954.**

	All Ages	Under 1 year	1 to 5 years	5 to 15 years	15 to 25 years	25 to 45 years	45 to 65 years	Over 65 years	Oakenshaw and Hunsworth	Scholes	Cleckheaton East	Cleckheaton West	Spen and Littleton	Millbridge	Hightown and Hartshhead	Roberttown and Norristhorpe	Gomersal	Birkenshaw	Removed to Hospital
Whooping Cough ...	92	10	54	27	1				1	5	14	20	11	4	11	1	15	10	1
Measles ...	74		47	25		2			6	1	5	4	9	16	21	8	3	1	
Chicken Pox ...	214	3	63	142	1	5			11	6	56	38	19	10	25	8	27	14	
Scarlet Fever ...	55		12	42		1			6	4	2	8	2	4	15	5	6	3	23
Pneumonia ...	24	1	8		2	2	4	7		4	9	4	4		2	1			
Erysipelas ...	7				1	1	5		1		3			1		1	1		
Dysentery ...	18	1	4	4	2	5	2				1	4	1	2	10				
Puerperal Pyrexia ...	1					1									1				
Diphtheria ...	1		1												1				1
Food Poisoning ...	7		3		1	2	1										7		
<b>TOTALS ...</b>	<b>493</b>	<b>15</b>	<b>192</b>	<b>240</b>	<b>8</b>	<b>19</b>	<b>12</b>	<b>7</b>	<b>25</b>	<b>20</b>	<b>90</b>	<b>78</b>	<b>46</b>	<b>37</b>	<b>86</b>	<b>24</b>	<b>59</b>	<b>28</b>	<b>25</b>

## TUBERCULOSIS.

There was a considerable increase in the notifications of pulmonary tuberculosis this year compared with last year (seventeen as against eleven). However, in addition to these new cases supervision of patients and contacts was carried out in respect of all the other cases remaining on the register in the Spenborough area. Nurse Smith, who carries out the duties of tuberculosis visiting both in Spenborough and Mirfield, has maintained the close co-operation which has always existed between the Public Health Department and the Consultant Chest Physician and Hospital staffs. There is little delay in this area in securing sanatorium treatment for patients and the social work and domiciliary visitation provided by the Public Health Service ensures as far as possible against spread of infection and the continuation in the home of any treatment advised. In addition to the many problems which have been dealt with through these services it has been possible with the co-operation of the Housing Committee to secure better living conditions in a number of cases.

The statistical details of tuberculosis in Spenborough are as follows :—

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0	—	—	—	—	—	—	—	—
1	—	—	—	—	—	—	—	—
5	1	—	1	2	—	—	—	—
10	—	1	1	1	—	—	—	—
15	2	1	1	1	—	1	—	—
20	1	1	1	—	—	—	—	—
25	1	3	—	—	—	1	1	—
35	—	2	—	1	1	—	—	—
45	2	—	—	—	2	2	1	—
55	—	—	—	—	—	—	—	—
64 and upwards	—	2	—	—	1	—	—	—
Totals	7	10	4	5	4	4	2	—



				Pulmonary		Non-Pulmonary	
				Males	Females	Males	Females
(a)	Number of Cases on	Register at commence-					
	ment of year	... ..	127	86	55	58	
(b)	Number of Cases notified	first time during the					
	year	... ..	7	10	4	5	
(c)	Removals from other	areas	3	2	—	—	
(d)	Number of Cases re-	moved from Register	69	50	46	42	
<hr/>							
(e)	Number of Cases remain-	ing on Register	68	48	13	21	
<hr/> <hr/>							

Seventeen notifications were received of admission of persons suffering from Tuberculosis to Sanatoria and fourteen discharges.

The following are the Institutions to which patients were sent :

				Admissions	Discharges
				Form 1	Form 11
Dewsbury General Hospital	...	...	...	1	—
Grassington Sanatorium	...	...	...	1	—
Scotton Banks	...	...	...	2	1
The Hospital, Middleton, Ilkley	...	...	...	4	6
Whitley Grange Hospital	...	...	...	7	4
St. George's Hospital, Leeds	...	...	...	—	1
Killingbeck Hospital, Leeds	...	...	...	1	1
Bradley Wood Sanatorium, Hudders-	...	...	...	—	1
field	...	...	...		
Staincliffe General Hospital	...	...	...	1	—
				<hr/>	<hr/>
				17	14
				<hr/> <hr/>	<hr/> <hr/>

## MENTAL HEALTH SERVICES.

The social work in connection with mental deficiency and mental illness continued to be carried out throughout the year by Mrs. de la Cour. This friendly supervision and ready advice means a great deal to many of those having the care and responsibility for such persons, and it is surprising indeed how much can be done to improve the lot of these unfortunate people by a skilled service of this type. The high rate of requests for after care visitation upon discharge from mental hospitals indicates the value which is placed upon this work by the patients themselves and by their relatives. In addition to supervising the general health and well being of patients strenuous efforts are made in suitable cases to obtain employment for them, and a number of successful placements of this type has been made. Close liaison is maintained through the social worker between the Health Department and Mental Hospitals, the psychiatric clinics and the general practitioners, and no difficulties have arisen in this connection. The mental health social worker has, on several occasions, also assisted the Duly Authorised Officer in dealing with female cases whose removal to mental hospitals had become necessary.

Nine mentally defective children from the Spenborough area attend daily at Occupation Centres, six at the Occupation Centre at Bradford and three at the one in Dewsbury. They are conveyed there by escort in transport provided through the Health Department. These children gain much in the way of community life and in interest of performance at these centres. Their horizons are thereby widened and life, one believes, is made happier for them.

### Mental Deficiency Statistics.

	Males	Females	Total
1. Number of defectives on register :			
(a) at home     ...     ...     ...	27	24	51
(b) in institutions     ...     ...	22	14	36
	<hr/> 49	<hr/> 38	<hr/> 87
2. Number of defectives under supervision at home :			
(a) Statutory Supervision     ...     ...	24	20	44
(b) Voluntary Supervision     ...	2	4	6
(c) On licence from institutions     ...	1	—	1
	<hr/>	<hr/>	<hr/>
Total under supervision	27	24	51
	<hr/>	<hr/>	<hr/>

3. (a) Number of defectives in gainful employment ... ..	15	7	22
(b) Number attending occupation centres ... ..	4	5	9
(c) Number receiving home teaching ...	—	—	—
(d) Number awaiting admission to Institution ... ..	1	—	1
Totals ... ..	20	12	32
4. Placed under supervision in 1954 ...	7	4	11
5. Placed under guardianship in 1954 ...	—	—	—
6. Admitted to institutions in 1954 ...	—	—	—
7. Admitted to occupation centres 1954 ...	—	1	1
8. Visits paid during 1954 :—			
(a) To cases on Licence ... ..	5	—	5
(b) To Cases under Statutory Supervision ... ..	323	280	603
(c) To cases under Voluntary Supervision ... ..	6	8	14
(d) For home reports for institutions	17	8	25
Total visits ... ..	351	296	647

#### Mental Illness Statistics.

	Males	Females	Total
Number of patients discharged from Mental Hospitals during the year ... ..	15	22	37
Number of patients followed up ... ..	15	22	37
Number of patients requesting after-care	11	23	34
Number of visits made to patients during 1954 ... ..	131	175	306
Number of reports on home conditions, requested by, and forwarded to mental hospitals ... ..	9	9	18

The Duly Authorised Officer dealt with the following cases from Spenborough during the year :—

	Males	Females	Total
Section 20 (Three Day Order) ... ..	1	2	3
Certified ... ..	2	1	3
Voluntary patient ... ..	1	3	4

In addition to the above there were also several Voluntary Patients admitted direct to the hospital without the Duly Authorised Officer being called in.



## HOME NURSING SERVICE.

There was a slight decrease in the number of cases attended during the year but the total number of visits to cases was increased. During the year the County Council agreed to implement my recommendation that a relief nurse should be appointed on the divisional staff and this has facilitated continuity of nursing treatment throughout the year. It should also mean that the service improves as it becomes possible to pay more visits, particularly to aged and chronic sick persons to whom the ministrations of the district nurse mean so much in the way of ease and comfort. So far as the nursing treatment of patients is concerned the district nurses work under the directions of the general medical practitioners and no difficulties of any magnitude have arisen during the year. It must be realised that to some extent the nature of home nursing care is changing, with larger numbers of "long term" or chronic cases whose nursing care involves heavy physical work as well as professional skill. This factor is to be taken into consideration together with the statistical returns in assessing the domiciliary nursing needs of an area.

### 1. No. of cases visited during 1954—

(a) Medical cases	...	...	...	...	...	...	554
(b) Surgical	...	...	...	...	...	...	157
(c) Infectious diseases	...	...	...	...	...	...	—
(d) Tuberculosis	...	...	...	...	...	...	22
(e) Maternal complications	...	...	...	...	...	...	2
Total							<u>735</u>

### 2. No. of visits paid during 1954 to—

(a) Medical cases	...	...	...	...	...	...	13,473
(b) Surgical cases	...	...	...	...	...	...	3,908
(c) Infectious diseases	...	...	...	...	...	...	—
(d) Tuberculosis	...	...	...	...	...	...	809
(e) Maternal complications	...	...	...	...	...	...	27
Total visits paid							<u>18,217</u>

## MIDWIFERY.

As has already been pointed out a very small proportion of confinements in Spenborough is carried out in the home and during the year the district midwives undertook 98 such cases. In spite of this, however, the midwives have extended their influence to ante-natal work and have visited the homes of patients who had booked hospital accommodation for their confinements. In addition they attended the ante-natal clinics where they were able to discuss their patients with the Medical Officer present. Gas and air analgesia was administered by the domiciliary midwives in 77 cases and pethidine was administered in 60 cases.

Confinement in the home where conditions are suitable is today as convenient, as safe, and at least as painless, as it is in any hospital and many will assert that it is better for the mother, for her newborn child, and for the other children of the family. The continued fall in the number of domiciliary confinements will inevitably lead to reductions in the number of midwives employed in the district, and this will make the maintenance of an efficient domiciliary midwifery service a matter of some difficulty.

Details are given of the work done by the District Midwives during the year :—

(a)

Details of Deliveries				Total No. of Cases
Dr. Not Booked		Dr. Booked		
Present	Not Present	Present	Not Present	
2	38	11	47	98

(b) Ante-natal visits     ...     ...     ...     ...     1119

(c) Post-natal visits     ...     ...     ...     ...     1912

(d) No. of cases receiving Gas & Air Analgesia     77

(e) No. of cases receiving Pethidine     ...     ...     60

The midwives sought medical aid on 40 occasions, details of which are given below :—

(i) Pregnancy	...	...	...	...	10
(ii) Labour	...	...	...	...	15
(iii) Lying-in ...	...	...	...	...	6
(iv) The child	...	...	...	...	9

**Pregnancy.**

Albuminuria ... ..	6
High Blood Pressure ...	3

Threatened miscarriage ...	1
----------------------------	---

**Labour.**

Malpresentation ...	1
Ruptured perineum ...	9
Post partum haemorrhage	2

Premature Labour ...	1
Prolonged labour... ..	2

**Lying in.**

Vomiting ... ..	1
Phlebitis... ..	2

Pyrexia ... ..	2
Illness of Mother ...	1

**The Child.**

Discharging eyes ...	3
Prematurity ... ..	1
Skin Condition ... ..	2

General condition ...	2
Vomiting ... ..	1

**ANTE-NATAL CLINICS.**

The proportion of expectant mothers attending the ante-natal clinics has remained fairly constant this year compared with last year which is rather better experience than is prevalent in many areas where there has been a dramatic decline in the use made of Local Authority ante-natal clinics. Almost half of the expectant mothers received their ante-natal care at these clinics.

Excellent co-operation has been established with the general practitioners in the area, and with the patient's consent her first attendance at the Clinic is notified to her own doctor where this has not already been done. Patients are also encouraged to attend their own doctors on at least two occasions during the ante-natal period. The proportion of expectant mothers attending an ante-natal clinic would increase if more of them could be brought to understand the value of the educative advice which is given by the doctors and midwives and health visitors who are in attendance at the Clinic and who will in part be responsible for the supervision of the health of the children after birth. In addition to the routine medical procedures, instruction is given in the hygiene of pregnancy, preparation for breast feeding, and on suitable diets. Classes are held on relaxation techniques and ante-natal exercises which serve to bring the expectant mother up to her confinement well adjusted mentally and physically to the experience she is about to undergo. Enquiries which I have made both from the domiciliary midwives and general practitioners and from Crossley Maternity Home leave me in no doubt of the value of these classes, and they are greatly to be encouraged. I am afraid that in medicine too often the psychological changes, the doubts and the fears which occur in pregnant women are overlooked, the emphasis being often entirely on physical care. It is highly encouraging, however, that certain general practitioners are now encouraging their patients to attend the relaxation classes which are conducted by Nurse Thompson at Elm Bank Clinic and an extension of this practice would be greatly welcomed.



Attendances at Ante-Natal Clinics :—

				Ante- Natal	Post Natal
Elm Bank Clinic ...	...	...	...	338	11
Valley Road Clinic	...	...	...	724	33
Birkenshaw Clinic	...	...	...	125	2
Total during the year				<u>1187</u>	<u>46</u>

Number of women who attended during the year :—

Elm Bank Clinic ...	...	...	...	75	11
Valley Road Clinic	...	...	...	147	33
Birkenshaw Clinic	...	...	...	47	2
Total during the year				<u>269</u>	<u>46</u>

Number of women attending for the first time :—

Elm Bank Clinic ...	...	...	...	53	11
Valley Road Clinic	...	...	...	110	33
Birkenshaw Clinic	...	...	...	20	2
Total during the year				<u>183</u>	<u>46</u>

Dental Treatment of expectant and nursing mothers :—

No. inspected by Dental Officer...	...	...	...	101
No. found to require treatment ...	...	...	...	94
No. found not to require treatment	...	...	...	7
No. who refused treatment	...	...	...	4
No. who failed attend for treatment	...	...	...	5
No. who received partial treatment	...	...	...	3
No. who received full treatment	...	...	...	50
No. still receiving treatment	...	...	...	21
No. of teeth extracted	...	...	...	240
No. of teeth filled	...	...	...	128
Scaling and gum treatment	...	...	...	43
No. of patients for whom dentures were fitted	...	...	...	18
No. referred to hospital for treatment	...	...	...	1
No. who asked for treatment to be carried out by their usual Dental Surgeon	...	...	...	1

## HEALTH VISITING SERVICE.

Once again the main efforts of the health visitors in relation to child welfare have been concentrated on visits to the home which I believe to be of prime importance. Such visits are in essence not only supervisory but educative and the health visitor has an unrivalled opportunity to gain the confidence and respect of the parents and to discuss with them those aspects of infant care and family life which may prove invaluable to the growing child. I am very pleased to say that in this work the health visitors have the full support and co-operation of the general practitioners in the area which of course does much to ensure the effectiveness of the work of both. The kindly and interested reception by the vast majority of parents is also an encouragement to the staff and an indication of the general desire for improving standards of parentcraft. The duties of the health visitor of today cover a wide range indeed and the value of their work to the community is undoubted.

An interesting addition to the normal duties undertaken by health visitors is the running of a Young Mothers Club which is held in the evenings at Elm Bank throughout the year. The purpose of this is partly social and partly educational. Various items connected with the upbringing of children are discussed informally and the mothers have an opportunity of discussing individual experiences with each other and with the nurses in attendance. This venture was started by Nurse Day, the Senior Health Visitor, and Nurse Greenhough with my full support, and I am bound to say that its success has in every way exceeded my expectations. It is hoped that it may be possible to extend such ventures to other clinic centres in the area.

Number of visits paid by health visitors during year :—

(a) To expectant mothers :—					1953	1954
(i) First visits	...	...	...	...	28	43
(ii) Total visits	...	...	...	...	76	95
(b) To children under 1 year of age :—						
(i) First visits	...	...	...	...	493	456
(ii) Total visits	...	...	...	...	8,229	8,936
(c) To children between the ages of one and five years :—						
(i) Total visits	...	...	...	...	3,429	3,949
(d) To other classes :—						
(i) Total visits	...	...	...	...	2,948	3,345
(e) No. of attendances at Clinics	...	...	...	...		587
(f) No. of parentcraft lectures	...	...	...	...		111
(g) No. of visits to schools for medical inspection, minor ailments, cleanliness surveys, etc.	...	...	...	...		841
(h) No. of home visits in connection with school-children						516

### CHILD WELFARE SERVICE.

The domiciliary work of the health visitors is supplemented by the attendance of children at the Child Welfare Centres where parents and their children have the opportunity of consulting with the health visitor and also the medical officer in charge. During the year attendances at these centres have decreased slightly but the number of medical consultations has increased. Immunisation and vaccination is also performed by the medical officers attending these clinics.



INFANT WELFARE CENTRES.

	Number of Infant Welfare Sessions now held per month	Number of children who first attended during the year and who at their first attendance were under 1 year of age	Number of children who attended during the year and who were born in			Total Number of Children who attended during the year	Number of attendances during the year made by children who at the date of attendance were :			Total Attendance during the year	Medical Consultations	
			1954	1953	1952-49		Under 1 yr.	1 but under 2	2 but under 5		Under 1 year of age	Over 1 year of age
Elm Bank, Cleckheaton	4	91	64	92	53	209	924	178	54	1156	259	67
Valley Road Clinic	4	83	78	90	73	241	942	303	100	1345	284	121
Birkenshaw Clinic	4	35	37	44	45	126	707	220	79	1006	147	38
Scholes Clinic	1	31	23	21	22	66	221	97	23	341	49	39
Roberttown Clinic	1	23	21	30	21	72	216	66	23	305	73	37
Gomersal Clinic	2	39	31	36	23	90	405	145	53	603	51	21
TOTALS	16	302	254	313	237	804	3415	1009	332	4756	863	323

## PROBLEM FAMILIES.

Although in Spenborough the average standard of parental care is quite satisfactory there are, of course, many families who require greater supervision because of their inability or unwillingness to maintain a consistently satisfactory level. In this connection the staff work in close co-operation with the officials of the National Society for the Prevention of Cruelty to Children, and I must record my thanks to Inspector Jenkins not only for his conscientious work in the area throughout the year and for his ready and willing help at all times, but also for the interesting report which follows upon the cases with which he has been associated in Spenborough during this period. I feel fortunate in having a personal connection with this wonderful voluntary organisation and gratified to some extent that Spenborough has what one might call a low "case load." Inspector Jenkins reports as follows :—

1.	Number of cases dealt with during 1954	...	...	19
2.	Classification :			
	(a) Neglect	...	...	13
	(b) Ill treatment	...	...	3
	(c) Advice sought	...	...	3
3.	Source of information :			
	(a) General public	...	...	8
	(b) Education	...	...	3
	(c) Other officials	...	...	8
4.	Number of children involved :			
	(a) Under two years	...	...	14
	(b) Two-five years	...	...	9
	(c) Five-fifteen years	...	...	19
	(d) Over fifteen	...	...	1

All these cases responded to warnings or advice and in no instance was one referred to the Courts.

Despite the fact that Spenborough is one of the largest of my areas, yet proportionately, the number of cases is very small. This could well be an indication of the very close co-operation existing between all welfare workers in the area.

It will be noticed that neglect is the main cause for concern in the area. I find that most of the cases are due to ignorance rather than deliberation and the majority of these families have responded either to a timely word of advice or warning.

The following is the record of work which has been maintained in connection with problem families current on our Health Department register :—

On register beginning 1954	...	...	...	...	20
Removed from district	...	...	...	...	1
Added to Register	...	...	...	...	1
Total on Register at end of 1954	...	...	...	...	20
Re-housed	...	...	...	...	2
Visits paid by Health Visitors	...	...	...	...	74
No. school children involved	...	...	...	...	70
No. pre-school children involved	...	...	...	...	16
No. babies born	...	...	...	...	3
No. stillbirths	...	...	...	...	—

## HOME HELP SERVICE.

Once again a further expansion took place in the Home Help Service during the year. Compared with last year 32 more cases received help and over 4,000 more hours were worked in providing help. It is noticeable too that the types of cases helped are more and more the chronic sick and infirm, which is as it should be. These are often very long term cases and there is no doubt that the Home Help Scheme has done and is doing a very great deal to improve the lot of a considerable proportion of elderly people in the community. Indeed, in a good number of cases it would be quite impossible for some of these people to remain at home in the absence of such a Service. The people of Spenborough are not lacking in the good neighbour spirit but it is easy to make too great demands on good neighbours and on relatives, and I would say that rather than replacing this voluntary effort the Home Help Service is bolstering it up and encouraging its continuance.

During the year more than sixty Home Helps were employed on a part-time basis and we have been on the whole extremely fortunate in the qualities displayed by the majority of this staff. Where so many loopholes are bound to exist it is surprising there have been so few complaints and much of the credit for this must go to Nurse Day, the Senior Health Visitor, who is largely responsible for the detailed arrangements which are made.

The following figures show the number and types of cases provided with Home Help in the Spenborough area during the year, the total hours worked at the various types of cases and the allocation of these hours on a percentage basis :

Reason for Provision	No. of Cases	Hours worked	Percentage
Maternity ... ..	38	3119	7.8
Tuberculosis ... ..	2	332	0.8
Chronic Sick & Infirm	185	29832	74.4
Others ... ..	49	6792	17.0
<b>Totals ...</b>	<b>274</b>	<b>40075</b>	<b>100</b>



## DAY NURSERIES.

The land on which the Moorend Day Nursery was situated was land requisitioned when the building was erected in 1943. Because the firm owning this land required it for its own use, and because of the change of County Council policy regarding the types of cases suitable for admission to its Day Nurseries, it was decided to close the Day Nursery at Moorend at the end of October. Of the most necessitous cases attending this Nursery six accepted vacancies offered them in the County Council's Day Nursery at Heckmondwike and the remaining cases made alternative arrangements.

I give below the details of the attendances at the Nursery up to the date of its closure :—

No. of approved places for children 0-2 years	...	...	15
No. of approved places for children 2-5 years	...	...	25
No. of attendances 0-2 years	...	...	1625
Average daily attendance 0-2 years	...	...	8
No. of attendances 2-5 years	...	...	4438
Average daily attendance 2-5 years	...	...	21
No. of days nursery was open	...	...	211

## CONVALESCENT HOME TREATMENT.

Under Section 28 of the National Health Service Act, 1946, the County Council is empowered to provide convalescent home treatment. General Practitioners recommend those who are in need of this service and during the year 11 Spenborough residents were admitted to the following Homes :—

Blackburn & District Convalescent Home, St. Annes	...	1
West Hill Convalescent Home, Southport	...	4
Men's Convalescent Home, Rhyl	...	1
Grange-over-Sands	...	1
Hunstanton	...	1
Silver Jubilee Convalescent Home	...	2
Semon Convalescent Home, Ilkley	...	1

## SCHOOL HEALTH SERVICE.

The following section shows statistically something of the amount of work carried out in connection with the supervision and care of the health of the school children in Spenborough, and records some of the facts observed.

The School Health Service now provides for the medical examination of a child during his first year of attendance at school, again when it attains the age of seven to eight years, when it first enters secondary school education and finally just prior to leaving school. There is thus throughout school life provision for the continual assessment of children both individually and collectively, and although physical standards and health among such children is today so good there is of course still further room for improvement, and it will be seen that a considerable number of conditions call for preventive action either in the shape of treatment or for observation to ensure that deterioration in health does not result. The sum total of such action over the years is very considerable and I doubt if it is often realised the great part this plays in the continual improvement of the physical standards of the community. This routine examination is at present the foundation of the School Medical Service but it will be seen from the ensuing sections of the report that upon this foundation a considerable edifice of treatment and prevention has been erected. Out of the routine examinations many special and sometimes prolonged individual examinations take place and this is particularly so in relation to the handicapped child. The treatment of minor ailments, of orthopaedic defects, of defective speech, of foot complaints and those ailments treated at the ultra violet light clinic, the testing of eyesight and the child guidance clinic, present an impressive picture of the importance which we attach to the care of the child in his formative years.

I am very glad to record that, due largely to the efforts of the school nurses and to the co-operation of parents, there has been a marked reduction in the amount of louse infestation among the school population this year, but there is of course much need for further improvement in this matter.

The health talks which are given as a routine twice a week to the senior girls at the South Parade Secondary Modern School have continued and thanks to the co-operation of the headmaster and staff are now a firmly established part of the curriculum. I have included in the report a note on the scope of these lectures and the objectives which we seek to attain thereby. I believe that they may well be the forerunner of an extensive system of education in health in all schools.

Total number of children examined at Routine Medical Inspections.

Entrants	...	...	...	...	...	...	647
7-8 Year Group	...	...	...	...	...	...	472
Intermediates	...	...	...	...	...	...	183
Leavers	...	...	...	...	...	...	259
Total							1561

Total number of children who have been re-examined for follow-up defects ... .. 159

Standards of physical development classified into age groups :—

Age Group	Physical Condition Above Average	Physical Condition Average	Physical Condition Poor
Entrants	248	394	5
7-8 Years	199	269	4
Intermediates	90	91	2
Leavers	131	128	—
Totals	668	882	11

#### Percentages.

Age Group	Physical Condition Above Average	Physical Condition Average	Physical Condition Poor
Entrants	38·3	60·9	0·8
7-8 Years	42·2	57·0	0·8
Intermediates	49·2	49·7	1·1
Leavers	50·6	49·4	0·0
Totals	42·8	56·5	0·7

During the year 61 free issues of dietary supplements in the form of iron tonics were made to school children where recommended by the School Medical Officer.



The following table shows the number and type of defects discovered at the routine School medical inspections :—

**Defects Table.**

Defects	Recommended for Treatment	Recommended for Observation	Totals
Skin ... ..	58	13	71
Ears :			
(a) Hearing ...	1	9	10
(b) Otitis Media	7	16	23
(c) Other ...	7	8	15
Nose and Throat	35	118	153
Speech ... ..	6	9	15
Cervical Glands ...	9	60	69
Heart and Circulation ...	9	19	28
Lungs ... ..	13	33	46
Developmental :			
(a) Hernia ...	1	2	3
(b) Other ...	7	15	22
Orthopaedic :			
(a) Posture ...	2	8	10
(b) Flat foot ...	18	2	20
(c) Other ...	65	44	109
Nervous System :			
(a) Epilepsy	—	2	2
(b) Other	8	8	16
Psychological			
(a) Development	3	11	14
(b) Stability	—	4	4
Other Defects ...	38	14	52
Totals ...	287	395	682

## SPECIAL EXAMINATIONS.

In accordance with the requirements of the Education Act, 1944, a number of children have been referred by the Education Authority which has necessitated the arrangement of special examinations. During the year 43 children were examined involving 63 examinations altogether. The following recommendations for special education were made :—

Education in a School for Spastics	...	...	...	...	2
„ „ School for Educationally Subnormal Pupils					3
„ by Home Tutor	...	...	...	...	3
„ „ School for the Deaf	...	...	...	...	1
„ „ School for the Partially Sighted			...	...	1

Reported to Local Authority for the purposes of the Mental Deficiency Acts—

Section 57 (3) (incapable of receiving education at school)	2
Section 57(5) (require supervision after leaving school ...)	5

During the year the following admissions to special schools were made :—

School for Educationally Sub-normal Pupils	...	...	...	4
School for Partially Sighted	...	...	...	1
School for the Deaf	...	...	...	1

During the year the following discharges from special schools were made :—

Open Air School	...	...	...	...	...	1
Hostel for Maladjusted children	...	...	...	...	...	2

The following table shows the number of children from Spenborough receiving, and those awaiting, education in special schools at 31st December, 1954 :—

Type of School	No. of children receiving special education	No. of children awaiting special education
School for partially sighted ...	1	1
School for the blind ... ..	2	—
School for the deaf ... ..	5	—
Epileptic Colony ... ..	1	—
Home Tuition ... ..	3	1
School for physically handicapped ... ..	2	—
School for Spastics ... ..	—	2
School for Educationally subnormal ... ..	9	10

## DENTAL INSPECTION AND TREATMENT OF SCHOOL CHILDREN.

I am indebted to Mr. H. Taylor, the Dental Officer at Elm Bank, for supplying me with the following figures relating to dental inspection and treatment in the schools of Spenborough during the year.

Routine Inspections	...	...	...	3611
Offered treatment	...	...	...	2044
Non-routine inspections	...	...	...	68
Offered treatment	...	...	...	67
Half-days spent carrying out inspections				18
Half-days spent carrying out treatment...				435
Children treated	...	...	...	2031
Attendances	...	...	...	3347

### Anaesthetics.

Local	...	...	...	...	663
General	...	...	...	...	650

### Temporary Teeth.

Extractions					
Septic	...	...	...	...	2291
For Orthodontia	...	...	...	...	185
Fillings	...	...	...	...	84
Dressings	...	...	...	...	46

### Permanent Teeth.

Extractions					
Septic	...	...	...	...	342
For Orthodontia	...	...	...	...	74
Fillings	...	...	...	...	1981
Dressings	...	...	...	...	222
Root Fillings	...	...	...	...	12
Crowns, inlays, etc.	...	...	...	...	31
Scaling and gum treatment	...	...	...	...	54
Dentures	...	...	...	...	11

### Orthodontic Cases.

No. of patients	...	...	...	57
No. of attendances	...	...	...	343



## EYES.

The eyes of all children attending school are tested at school by the school nurses each year, and those whose vision is worse than 6/9 Snellin in one eye are referred for further examination by the Ophthalmologist who attends the clinic at Elm Bank twice weekly. This ensures the quick treatment of defective vision and has its preventive aspect in the preservation of good eyesight. During the year there has been no delay in the provision of spectacles.

The following statistics give details of the cases examined :—

Number of children examined for the first time	...	185
Number of re-examinations	... ..	682
Total number of attendances	... ..	867
Number of sessions held during the year	... ..	69
Number for whom spectacles were prescribed	... ..	309
Number referred for other treatment	... ..	139

## MINOR AILMENTS

Minor ailments are treated by the nurses both at the clinics and in the schools. The following table gives details of such treatments during 1954 :—

Minor Ailment	No. treated
Skin :	
Ringworm—body	4
Scabies	—
Impetigo	55
Other skin diseases	65
Eye Disease :	
(External and other, but excluding squint, errors of refraction and cases admitted to hospital).	22
Ear Defects :	
Otitis media	2
Otorrhoea	5
Other	6
Miscellaneous	1293
( <i>e.g.</i> , minor injuries, bruises, sores, chilblains, etc.)	
Total	1452
Total number of attendances at Authority's Minor Ailment Clinics	1351

## ULTRA VIOLET LIGHT CLINIC.

The Ultra Violet Light Clinic continued to be held during the year at Valley Road Clinic, Littletown. Cases attended twice weekly for an initial period of six weeks, after which they were re-examined by the doctor and the necessity for a continuation of treatment decided. The following table gives details of attendances and the types of cases treated :—

Total No. of sessions held	...	...	...	...	75
No. of sessions held weekly	...	...	...	...	2
No. of cases treated	...	...	...	...	63
No. of treatments	...	...	...	...	669
Average number of attendances per session	...	...	...	...	9
Average length of course of treatment	...	...	...	...	5 weeks
No. on register at end of year	...	...	...	...	11

### Details of cases treated :

Debility following whooping cough	...	...	...	...	4
Anaemia and general debility	...	...	...	...	18
Debility following measles	...	...	...	...	1

### Chest Complaints :

(a) Bronchitis	...	...	...	...	11
(b) Bronchiectasis	...	...	...	...	1
(c) Asthma	...	...	...	...	2
(d) Frequent catarrhal colds	...	...	...	...	13
Enlarged cervical glands	...	...	...	...	3
Poor Muscular development	...	...	...	...	6

### Skin Diseases :

(a) Chilblains	...	...	...	...	1
(b) Boils	...	...	...	...	1
Re-current Tonsillitis	...	...	...	...	2

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63

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### SPEECH THERAPY.

The Speech Therapist continued to hold two half-day sessions every week at the Valley Road Clinic, Liversedge, but unfortunately she terminated her appointment on leaving the district in the middle of December, and at the time of writing no replacement as yet been engaged. Cases are referred to her mainly from the School Medical Inspections and by the Headteachers of schools and I give below details of attendances at this Clinic.

Total number of sessions held during year ... ..	95
	Speech Defects
No. of Cases already attending Clinic...	Stammers 6
Number of cases admitted for treatment during the year ... ..	1
Number of cases discharged during year :	
(a) Speech normal ... ..	—
(b) Unsuitable for treatment ...	1
(c) Left School ... ..	—
(d) By reason of non-attendance ...	—
Number of cases awaiting treatment ...	4
Number of visits made to Schools ... ..	7
Number of home visits ... ..	6
Number on register at 11th December, 1954	5

### CONSULTANT PAEDIATRIC CLINIC.

Dr. M. F. G. Buchanan of the Department of Child Health, Leeds University, attended Elm Bank Clinic in a consultant capacity and during the year twenty-two sessions were held. Cases were referred to him both from the Assistant County Medical Officers and from General Practitioners in the area.

I give below details of attendances and the types of cases seen :—

No. of sessions held during the year ... ..	22
No. of individual patients seen :	
(a) Pre-school children ... ..	4
(b) School children ... ..	63
Total number of attendances ... ..	125
Types of case seen :	
(a) Enuresis ... ..	35
(b) Obesity ... ..	3
(c) Heart Defects ... ..	9
(d) Epilepsy ... ..	3
(e) Cerebral palsy ... ..	1
(f) Congenital abnormality ... ..	2
(g) Lung defect ... ..	5
(h) Miscellaneous ... ..	9
	Total
	67



### CHILD GUIDANCE CLINIC.

Dr. M. M. MacTaggart, the County Psychologist, continued to hold her clinic once a week at Ings Grove, Mirfield. Children attending this clinic come not only from Mirfield and Spenborough but also from neighbouring Divisions. The figures given below relate, however, only to children from Spenborough and Mirfield.

					Boys	Girls	Total
1.	No. of new cases seen during year	...	...	...	7	4	11
2.	No. of cases continuing attendance from previous year	...	...	...	4	7	11
3.	Total number of cases seen during year	...	...	...	11	11	22
4.	Total number of attendances made during the year for—						
	(a) individual interview	...	...	...	34	10	44
	(b) group therapy	...	...	...	63	41	104
5.	No. of cases recommended for residential treatment in—						
	(a) Hostel for Maladjusted Children	...	...	...	—	—	—
	(b) E.S.N. Special School	...	...	...	—	—	—
	(c) Other	...	...	...	—	—	—
6.	No. of cases referred for psychiatric opinion	...	...	...	—	—	—
7.	No. of cases examined at the particular request of the Magistrates	...	...	...	—	—	—
8.	Types of problem for which cases were referred to Child Guidance Clinic—						
	(a) Behaviour	...	...	...	4	6	10
	(b) Delinquency	...	...	...	1	—	1
	(c) Nervous problems	...	...	...	2	3	5
	(d) Enuresis	...	...	...	1	—	1
	(e) Others	...	...	...	3	2	5

## PHYSIOTHERAPY.

The Physiotherapist continued to attend Elm Bank Clinic for two half-day sessions a week, and during the year 90 half-day sessions were held. The following table shows details of attendance and type and number of defects referred :—

No. of children on register 1st January, 1954	...	...	27
No. of children referred for treatment	...	...	36
Total number of attendances	...	...	799
Total number of treatments	...	...	836
No. of children discharged	...	...	34
No. of children on register 31st December, 1954	...	...	29

Defect.	Number.
Asthma	10
Bronchitis	2
Bronchiectasis	2
Postural	12
Flat feet	17
Kyphosis	1
Scoliosis	3
Breathing Exercises	9
Postural and breathing	2
Torticollis	2
Cerebral Palsy	2
Knock Knee	1
	<hr/>
	63
	<hr/>

## CHIROPODY.

The chiropodist continued to hold two half-day sessions a week one at Elm Bank Clinic and one at Valley Road Clinic and during the year 99 half-day sessions were held, at which 360 individual patients were treated. These patients received a total of 1,387 treatments. The following table gives the types and numbers of treatments given :—

Defects	Numbers	Defects	Numbers
Hallux Valgus	36	Chilblains	60
Hammer Toes	20	Underlying/Overlapping	
Pes Cavis	11	Toes	114
Corns and Callus	156	Verrucae Pedis	94
Nail Conditions	49	Metatarsalgia	18
Weak Foot	46	Tinea Pedis	6
Hallux Rigidus	16	Septic Conditions	18

## HEALTH EDUCATION FOR SENIOR GIRLS.

On the question of health education it is surely logical to believe that basic instruction in the precepts of healthy living and good parentcraft should be taught systematically during school life. After the pupil leaves school this important education too often depends on the magazine press, relatives, parents, and acquaintances who are not always, one might almost say seldom, in a position to impart sound advice in an objective and acceptable manner. The lectures which the health visitors give to senior girls at the Secondary Modern School have continued during the year.

The lectures follow a set syllabus and deal in the main with physiology and development, life experiences, and fundamental health principles in the period from conception to adolescence. The objectives as stated in my Annual Report for the year 1953 are as follows :—

- (a) To train the girls to take an intelligent and informed interest in the everyday matters pertaining to health which are familiar to most of them, *e.g.*, in diet, personal hygiene, exercise, rest and clothing.
- (b) To instruct them in the basic health principles relating to the care of infants and young children and their day to day management. To give them interest in the management and development of others within their own homes or neighbourhood, and as some slight preparation for future motherhood.
- (c) To impart knowledge of the physiological changes concerned with menstruation and conception and their significance. Personal care during these incidents.
- (d) To indicate common causes of illness in infancy and childhood. The significance of such illness and measures taken for prevention.
- (e) Incidence and types of accidents in the home, their causes, methods of prevention and minor first aid treatment.
- (f) To impart knowledge concerning Health Services available to the public.

and approximately twelve main headings are dealt with each term. The complete syllabus was printed in my Annual Report for the year 1953.

These lectures are given by the Health Visitors, who also set examinations on the subjects which have been covered, and scrutiny of these tests provide an indication of the interest with which they have been received by the pupils. It is sometimes surprising how much fundamental knowledge has been retained, even although the pupil's ability to express herself in writing may be limited. These courses have been well received by the Headmasters and staff of the school concerned, and it is largely due to their interest, co-operation and encouragement, that this has become one of the Health Visitors' more pleasant routine tasks. It is my personal belief that whereas this may not be the only worth while form of Health Education, it is by far the most likely to show profit in the long run.



### **CLEANLINESS INSPECTIONS.**

Three routine inspections were carried out at each school by the school nurses and a total of 12,667 inspections and re-inspections were carried out. 426 individual children, were reported to be unsatisfactory on 594 occasions but it should be pointed out that in the majority of cases the degree of infestation is extremely light.

The remedial procedure adopted on the discovery of these defects is to notify the parents informally in the first instance, visiting if necessary to give advice on the methods of dealing with infestation. If cure is not effected the nurse visits the home and interviews the parents, and finally, if it is evident that insufficient care is being exercised, the Statutory Notice under the Education Act, 1944, is sent requiring the child to be cleansed to the satisfaction of the Medical Officer or of the person appointed by him for that purpose within 48 hours. No Statutory Notices were issued during the year.

The section of the work which follows, relating to the Sanitary Circumstances of the area and the work of the Sanitary Inspectors, has been compiled by Mr. J. F. TEMPLEMAN, Chief Sanitary Inspector.

**FACTORIES ACT, 1937.**

**Factories (Mechanical and Non-Mechanical)**

There are 357 factories in the area. Of these 258 are factories with mechanical power and 99 without. 115 inspections and revisits were made to these premises and the following improvements were carried out :—

**Improvements.**

Marking of W.C's. as to sex	...	...	...	...	1
Provisions of artificial lighting in W.C's.			...	...	1
Cleansing of W.C's.	...	...	...	...	1

**Outworkers.**

6 persons in the district were notified to the Department during the year. Of these 5 were engaged in making apparel for firms outside the area, and 1 was engaged in manufacture of endless bands for a local firm.

**INSPECTION AND SUPERVISION OF FOOD.**

**A. SALE OF MILK.**

**1. The Milk and Dairies Regulations, 1949.**

Distributors of Milk residing in the area	...	...	56
Distributors of Milk residing outside the area	...	...	18

*(a) The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949.*

Dealers' Licences to sell Pasteurised Milk	...	...	30
Supplementary Licences to sell Pasteurised Milk	...	...	8
Dealers' Licences to sell Sterilised Milk	...	...	69
Supplementary Licences to sell Sterilised Milk	...	...	4

*(b) The Milk (Special Designation) (Raw Milk) Regulations, 1949.*

Dealers' Licences to sell Tuberculin Tested Milk	...	...	23
Supplementary Licences to sell Tuberculin Tested Milk	...	...	12

**2. The Milk and Dairies Regulations, 1949.**

*Details of work carried out :—*

Name on Vehicles	...	...	...	...	...	...	1
------------------	-----	-----	-----	-----	-----	-----	---

### 3 Milk Sampling.

The following tables show the number and results of samples taken by the Department :—

	Satisfactory	Unsatisfactory	Total
Accredited ... ..	10	1	11
Pasteurised ... ..	20	—	20
Tuberculin Tested ... ..	30	1	31
Tuberculin Tested (Pasteurised) ... ..	9	—	9
Raw Milk ... ..	57	5	62
Sterilised ... ..	5	—	5
	<hr/> 131	<hr/> 7	<hr/> 138
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

### 4. Examination for Bacillus Tuberculosis.

During the year 58 samples of milk were submitted by the Department for examination for tuberculosis. All of these were negative.

### 5. The Milk (Special Designations) (Specified Areas) No. 2) Order 1954.

The above Order came into force in the area on the 1st October, 1954. Its effect was that in the areas specified in the Schedule to the Order it became illegal for any person to sell by retail for human consumption any milk other than milk which may be sold as specially designated milk in accordance with the Special Designation Regulations 1949/1950. The main effect of the Order was that all raw milk other than Tuberculin Tested had to be pasteurised.

### B. MEAT INSPECTION.

The following table shows the number of animals slaughtered at the Public Abattoir, Liversedge. One Inspector is employed full-time at the Abattoir to ensure 100% inspection :—

Month	Beasts	Sheep	Pigs	Calves	Goats	Total
January ...	291	1280	429	60	—	2060
February ...	279	1253	531	35	—	2098
March ...	439	1711	845	13	—	3008
April ...	401	1194	780	23	—	2398
May ...	456	778	883	7	—	2124
June ...	307	1478	721	6	—	2512
July ...	380	757	66	11	—	1214
August ...	412	1312	136	24	—	1884
September ...	381	1205	235	30	—	1851
October ...	401	1127	328	113	—	1969
November ...	505	1149	486	68	—	2208
December ...	380	738	737	47	—	1902
	<hr/> 4632	<hr/> 13982	<hr/> 6177	<hr/> 437	<hr/> —	<hr/> 25228
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>



Carcases Inspected and Condemned.

	Cattle	Cows	Calves	Sheep and Lambs	Pigs
Number killed ... ..	3693	939	437	13982	6177
Number inspected ... ..	3693	939	437	13982	6177
<b>All diseases except T.B.</b>					
Whole carcases condemned ... ..	3	2	10	6	5
Carcases of which some part or organ was condemned ... ..	472	317	3	222	789
Percentage of the number in- spected affected with diseases other than T.B. ... ..	12.8%	33.9%	3.4%	1.6%	12.8%
<b>Tuberculosis only.</b>					
Whole carcases condemned ... ..	3	12	—	—	1
Carcases of which some part or organ was condemned ... ..	291	265	—	—	85
Percentage of the number in- spected affected with Tuber- culosis ... ..	7.9%	29.4%	—	—	1.3%

14 whole cow carcases were condemned as against 32 in 1953.

Total weight of meat condemned during the year was :—

	Tons	cwts.	qrs.	lbs.
Tuberculosis ... ..	13	5	2	20
Other diseases ... ..	8	—	3	23
	21	6	2	15

Slaughter of Animals Act, 1933.

Slaughter of Animals (Amendment) Act, 1954.

27 licences were granted for the purpose of slaughtering or stunning animals in a slaughterhouse or knackersyard.

The following new Acts and Regulations came into operation during the year :—

1. Slaughter of Animals (Amendment) Act, 1954.  
(From 1st October, 1954).

The main purpose of the Act is to implement the recommendations of the Committee of Inquiry into the Slaughter of Horses, but most of its provisions apply to other animals slaughtered at slaughterhouses and knackers yards.

The provisions deal with :—

- (a) Licensing of premises for the slaughter of animals.
- (b) Regulations for securing humane conditions.
- (c) Licensing of slaughtermen.

Licences must now specify the kinds of animals which may be slaughtered by the holder of the licence and the types of instrument he may use.

2. The Slaughter of Animals (Prevention of Cruelty) Regulations, 1954.

These regulations were made under the preceding Act and came into operation on 1st December, 1954. The main provisions relate to :—

- (a) Construction, lay-out and equipment of Lairage and Slaughterhalls.
- (b) Conditions to be observed in Lairages.
- (c) General conditions to be observed in Slaughterhouses and Knackers Yards.
- (d) Special provisions for Knackers Yards.
- (e) Additional provisions for horses.
- (f) Notices, Records and Returns.

3. The Slaughterhouses Act, 1954.

(Date of operation 5th July, 1954).

The Act was passed to make local authorities responsible for the time being for securing that adequate slaughterhouse facilities are available locally ; to explain and amend the law with respect to the provisions by local authorities of public slaughterhouses, the making of charges in respect of such slaughterhouses and the grant and renewal of licences under section 57 of the Food and Drugs Act 1938 ; to make further provision with respect to the regulation and restriction of private slaughterhouses and the payment of compensation where a licence or registration in respect of such a slaughterhouse is refused or ceases to be in force.

**Public Abattoir, Headlands Road, Liversedge.**

Termination of Meat and Livestock Scheme.

It became apparent early in the year that Government Control of Slaughtering would cease in the summer. The effect of this was that the Abattoir at which slaughtering was carried on for Dewsbury, Mirfield, Heckmondwike and Spensborough, would once more be available for use by private contractors. It also meant the possible re-opening of the existing 13 private slaughterhouses in the district.

In February, the Spensborough Retail Butchers' Association made enquiries as to the facilities to be made available to them and invited representatives to their Annual General Meeting to inform them of the Council's policy.



At the February Health Committee Meeting I gave a report on the Government's White Paper on Decontrol of Food, with special reference to the section relating to the Closure of Private Slaughterhouses where public facilities are provided. At the same meeting it was resolved that the Association be informed that facilities would be available for the Association or any private butcher.

The following resolution was also passed :—

“That the Council re-affirm their decision of November, 1945, that their future policy is the eventual closure of all private slaughterhouses in the district.”

Subsequently, the Chairman and myself attended the Association's Annual Meeting and the Council's policy was explained in detail. Representations made by the butchers were implemented in due course.

In March the Committee considered the Ministry Circular M.F. 5/54, setting out the general principles which the Council were asked to take into account when considering the licensing and provision of slaughterhouses for the period immediately following the decontrol of meat and livestock in July, 1954.

It was decided (*a*) to ask representatives of neighbouring authorities to a meeting in order to discuss the possibility of butchers in their area using the Public Abattoir, and also (*b*) to ascertain from butchers and wholesalers in our area the extent of their slaughtering needs after control.

After meeting butchers and wholesalers it was felt that the Abattoir would be overburdened in the early part of the week if all the needs of outside districts were met. No meeting was held with other authorities, but permission was given to two butchers outside the area to use the Abattoir. In one case this enabled the Council not to grant a Slaughterhouse Licence.

In effect, the Abattoir does now serve surrounding areas through wholesalers.

In June the Committee decided to proceed with minor improvements at the Abattoir. It also refused an application for a Slaughterhouse Licence. In July the Slaughterhouses Act, 1954, came into effect and after consideration the Committee passed the following resolution :—

“That pursuant to the provisions of Section 61 of the Food and Drugs Act, 1938, the Council, having provided a public slaughterhouse, hereby determine that after the date when this resolution shall be approved by the Minister of Food, no fresh licence to keep premises as a slaughterhouse shall be granted to them under that Act, and that on the said date all such licences then in force shall cease to have effect and shall not be renewable.”

This resolution was subsequently confirmed by the Minister.



At the same meeting a Sub-Committee was appointed to consider the alterations and improvements necessary at the Public Abattoir.

In September, the Sub-Committee's report was considered and it was resolved that firms specialising in Abattoir equipment be requested to advise on the immediate and future alterations and improvements necessary at the Public Abattoir.

Visits were subsequently made to Abattoirs in other areas.

In December I submitted an outline scheme for the reconstruction of the Abattoir, together with the provision of a new lairage and offices and other buildings. The scheme was approved in principle and the Engineer instructed to prepare the necessary estimates and plans.

It can be said that the change-over from Control to private trading was accomplished smoothly. For 14 years the Abattoir had been used solely for Government purposes and it was a matter for surprise that so few difficulties were encountered when Control ended.

The duty placed on the Council under the Slaughterhouses Act, 1954, to secure that adequate slaughterhouse facilities were available locally, had been properly carried out.

Finally, it should be stressed that the Committee are alive to the problems they are faced with in connection with the Abattoir, and it is hoped that the work of improvement and extension will proceed speedily and that Spenborough will be provided with an Abattoir befitting its Borough status.

#### **Certification of Meat—Fatstock Guarantee Scheme.**

The Committee made application to the Ministry of Food for the approval of the Public Abattoir as a deadweight certification centre for all classes of fatstock under the above scheme. The approval was given and the services of a fully qualified meat grader provided at the Abattoir.

#### **C. INSPECTION OF OTHER FOODS.**

(a) The following unsound food was inspected and condemned during the year :—

					lbs.
Canned milk	...	...	...	...	224 $\frac{1}{2}$
Canned peas	...	...	...	...	269 $\frac{1}{4}$
Canned beans	...	...	...	...	94 $\frac{3}{4}$
Canned stew	...	...	...	...	1
Canned corned beef	...	...	...	...	64
Canned fruit	...	...	...	...	312
Canned meat	...	...	...	...	268 $\frac{3}{4}$
Canned ham	...	...	...	...	1070 $\frac{1}{2}$
Canned tongue	...	...	...	...	162
Canned steak	...	...	...	...	2 $\frac{1}{4}$
Canned fish	...	...	...	...	81 $\frac{1}{4}$

					lbs.
Canned soup	...	...	...	...	35
Canned steak and vegetables	...	...	...	...	52½
Canned cream	...	...	...	...	1½
Canned chicken	...	...	...	...	14½
Canned tomatoes	...	...	...	...	21½
Canned spaghetti	...	...	...	...	5½
Canned pork	...	...	...	...	¾
Canned vegetables	...	...	...	...	31½
Canned carrots	...	...	...	...	2½
Canned eggs	...	...	...	...	24
Yeast	...	...	...	...	112
Veal	...	...	...	...	12
Sausage	...	...	...	...	1
Pickles	...	...	...	...	1¼
Bacon	...	...	...	...	63½
Cheese	...	...	...	...	43½
Cereals	...	...	...	...	44¼
Jelly Crystals	...	...	...	...	61½
Dried apricots	...	...	...	...	11
Sultanas	...	...	...	...	102
					<hr/>
					3191½
					<hr/>

1 Ton 8 Cwt. 1 Qrs. 27½ lbs.

(b) 17 samples of ice cream were submitted for bacteriological examination. These were graded as follows :—

Grade 1	13	Satisfactory
Grade 2	1	Satisfactory
Grade 3	3	Doubtful
Grade 4	0	Unsatisfactory

No difficulties were encountered during the year. The sample results are satisfactory.

#### D. INSPECTION OF FOOD PREMISES.

The following table shows the number of food preparing premises registered in the area :—

Bakehouses	...	...	...	...	...	...	14
Fish Frying	...	...	...	...	...	...	52
Ice Cream Manufacturing	...	...	...	...	...	...	6
For the Sale of Ice Cream	...	...	...	...	...	...	98
Premises used for the preparation or manufacture of sausages, potted, pressed, pickled or preserved food intended for sale	...	...	...	...	...	...	33

4 premises were registered for the sale of pre-wrapped ice cream during the year.

During the year 1,875 visits were made to premises where food is prepared for sale or sold. Informal notices were served for the following defects. These were complied with :—

Cleansing of premises	...	...	...	...	...	41
Provision of sink	...	...	...	...	...	7
Provision of hot water supply	...	...	...	...	...	23
Dirty utensils	...	...	...	...	...	5
Provision of waste bins	...	...	...	...	...	1
Infringements of Food Handling Byelaws				...	...	55
Disrepair of floors and stairs	...	...	...	...	...	11
Disrepair of ceiling and walls	...	...	...	...	...	7
Disrepair of roof	...	...	...	...	...	3
Disrepair of eavesgutter	...	...	...	...	...	1
Inadequate ventilation	...	...	...	...	...	1
Accumulation of waste material	...	...	...	...	...	1
Lighting and ventilation of W.C's.			...	...	...	4
Defective drainage	...	...	...	...	...	2
Cleansing of W.C's.	...	...	...	...	...	1
						163

During the year, proceedings were taken against the occupier of a food shop for offences against the Council's Food Handling Byelaws. Fines totalling £6 0s. 0d. were imposed and the Magistrates complimented the Council on bringing the case forward.

### E. WATER SUPPLY.

The water supply in the area is satisfactory both in quantity and quality.

Number of dwelling houses supplied direct from main	...	13045
Number of population supplied direct from public water mains	...	36755
Number of dwelling houses supplied from public water mains by means of stand pipes	...	Nil
Number of population supplied from water mains by means of stand pipes	...	Nil

### Sampling.

Bacteriological.			Chemical		
Satis- factory	Unsatis- factory	Total	Satis- factory	Unsatis- factory	Total
11	1	12	8	0	8

4 Bacteriological samples were taken from the Public Swimming Baths and was found to be satisfactory.



# **SANITARY INSPECTION OF DISTRICT.**

T.B. Samples	...	...	...	...	...	...	...	38
Dairies	...	...	...	...	...	...	...	16
Milk Distributors	...	...	...	...	...	...	...	147
Milk Sampling	...	...	...	...	...	...	...	141
Water Sampling	...	...	...	...	...	...	...	22
Ice Cream Vendors	...	...	...	...	...	...	...	11
Ice Cream Shops	...	...	...	...	...	...	...	39
Ice Cream Sampling	...	...	...	...	...	...	...	17
Ice Cream Manufacturers	...	...	...	...	...	...	...	7
Bakehouses	...	...	...	...	...	...	...	65
Fish Friers	...	...	...	...	...	...	...	107
Food Preparing Premises	...	...	...	...	...	...	...	87
Canteens	...	...	...	...	...	...	...	22
Cafes and Restaurants	...	...	...	...	...	...	...	41
Butchers Shops	...	...	...	...	...	...	...	149
Food Shops	...	...	...	...	...	...	...	334
Food Handling Byelaws	...	...	...	...	...	...	...	200
Public Abattoir	...	...	...	...	...	...	...	511
Transport and Handling of Meat	...	...	...	...	...	...	...	24
Food Inspection	...	...	...	...	...	...	...	97
Food Poisoning Enquiries	...	...	...	...	...	...	...	1
Public Houses	...	...	...	...	...	...	...	20
Housing Act	...	...	...	...	...	...	...	711
Housing Act Re-inspections	...	...	...	...	...	...	...	343
Overcrowding and points priority	...	...	...	...	...	...	...	29
Public Health Act	...	...	...	...	...	...	...	1481
Public Health Act re-inspections	...	...	...	...	...	...	...	941
Shops Act	...	...	...	...	...	...	...	110
Rag Flock Act	...	...	...	...	...	...	...	4
Prevention of damage by Pests Act	...	...	...	...	...	...	...	305
Pets Act	...	...	...	...	...	...	...	6
Housing Repairs and Rents Act, 1954	...	...	...	...	...	...	...	44
Small Dwellings Acquisition Act	...	...	...	...	...	...	...	37
Infectious Disease	...	...	...	...	...	...	...	132
Verminous and Unclean premises	...	...	...	...	...	...	...	285
Tents, Vans and Sheds	...	...	...	...	...	...	...	3
Drainage	...	...	...	...	...	...	...	773
Privy Midden Conversions	...	...	...	...	...	...	...	105
Atmospheric Pollution	...	...	...	...	...	...	...	401
Smoke Observations	...	...	...	...	...	...	...	122
Refuse Collection and Salvage	...	...	...	...	...	...	...	75
Controlled Tips	...	...	...	...	...	...	...	130
Factories	...	...	...	...	...	...	...	97
Outworkers	...	...	...	...	...	...	...	7
Fairground	...	...	...	...	...	...	...	22
Public Conveniences	...	...	...	...	...	...	...	112
Market	...	...	...	...	...	...	...	65
Offensive Trades	...	...	...	...	...	...	...	6
Offensive Accumulations	...	...	...	...	...	...	...	21
Noise Nuisances	...	...	...	...	...	...	...	5
Hairdressers	...	...	...	...	...	...	...	46
Interviews	...	...	...	...	...	...	...	874
Complaints	...	...	...	...	...	...	...	438
Miscellaneous	...	...	...	...	...	...	...	1221

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**SUMMARY OF DEFECTS REMEDIED DURING 1954.**  
**HOUSING ACT, 1936 and PUBLIC HEALTH ACT, 1936.**

W.C. apparatus repaired	...	...	...	...	...	45
New dustbins provided	...	...	...	...	...	174
Drains cleansed and repaired	...	...	...	...	...	37
Defective sinks and waste pipes	...	...	...	...	...	19
Accumulations of refuse	...	...	...	...	...	6
Rainwater pipes and gutters repaired	...	...	...	...	...	50
Defective roofs	...	...	...	...	...	64
Damp walls	...	...	...	...	...	18
Pointing of walls	...	...	...	...	...	13
Repairs to entrance steps	...	...	...	...	...	2
Defective windows and cords	...	...	...	...	...	20
Defective chimney stacks and pots	...	...	...	...	...	12
Defective plasterwork	...	...	...	...	...	26
Ranges, flues and fireplaces	...	...	...	...	...	8
Repairs to privy middens	...	...	...	...	...	1
Defective ceilings	...	...	...	...	...	3
Defective doors	...	...	...	...	...	4
Defective floors	...	...	...	...	...	13
Water supply improved	...	...	...	...	...	2
Nuisance from poultry keeping	...	...	...	...	...	3
Cleansing of houses	...	...	...	...	...	2
Yard drainage and paving	...	...	...	...	...	4
Defective washboiler	...	...	...	...	...	1
Defective coal chute	...	...	...	...	...	1
Defective skirting board	...	...	...	...	...	1
Nuisance from burning rubbish	...	...	...	...	...	1
Woodworm infestations	...	...	...	...	...	2
Insufficient or unsuitable sanitary accommodation	...	...	...	...	...	10
Cleansing of cellar	...	...	...	...	...	1
						543
						543

**HOUSING.**

**Number of New Houses erected during the year.**

(a) Total, including numbers given separately under (b)	...	176
1. By the Local Authority	I. Permanent	143
	II. Temporary	Nil
2. By other Local Authorities	...	Nil
3. By other bodies or persons	...	33
(b) With State assistance under the Housing Acts :		
1. By the Local Authority	...	143
2. By other bodies or persons	...	Nil

# 1. Inspection of Dwellinghouses during the year.

(1) (a) Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts) ... ..	526
(b) Number of inspections made for the purpose ...	1502
(2) (a) Number of dwellinghouses (included under sub-head (1) above) which were included and recorded under the Housing Consolidated Regulations, 1925 and 1932 ... ..	Nil
(b) Number of inspections made for the purpose ...	Nil
(3) Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... ..	97
(4) Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation ...	226

# 2. Remedy of Defects during the year without Service of Formal Notices.

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their Officers ... ..	203
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# 3. Action under Statutory Powers during the year.

## (A) *Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936.*

(1) Number of dwellinghouses in respect of which notices were served requiring repairs ... ..	21
(2) Number of dwellinghouses which were rendered fit after service of formal notices :—	
(a) By Owners ... ..	13
(b) By Local Authority in default of owners ... ..	8

## (B) *Proceedings under Public Health Acts.*

(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied ...	26
(2) Number of dwellinghouses in which defects were remedied after service of formal notices :—	
(a) by owners ... ..	14
(b) By Local Authority in default of owners ... ..	12



(C) *Proceedings under Sections 11 and 13 of Housing Act, 1936.*

(1) Number of dwellinghouses in respect of which Demolition Orders were made	... ..	59
(2) Number of houses demolished in pursuance of Demolition Orders	... ..	29

The Council also accepted 6 undertakings from owners stating that they agreed not to relet 6 houses for human habitation.

In addition the Council rehoused 3 families from 3 houses which were dangerous and subsequently demolished.

(D) *Proceedings under Section 12 of the Housing Act, 1936.*

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	...	5
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	...	Nil

(E) *Proceedings under section 25 of the Housing Act 1936.*

In July the Council made the following Orders :—

- (a) Well Street, Littletown, Clearance Order 1954.  
(13 houses, 25 occupants).
- (b) Cringles, Oakenshaw, Clearance Order 1954.  
(8 houses, 17 occupants).
- (c) Drub Lane, Clearance Order 1954.  
(13 houses, 31 occupants).

**4. Housing Act, 1936. Part IV. Overcrowding.**

(a) (1) Number of dwellinghouses overcrowded at the end of the year	... ..	63
(2) Number of families living therein	... ..	101
(3) Number of persons dwelling therein	... ..	325
(b) (1) Number of new cases of overcrowding reported during the year	... ..	17
(c) (1) Number of cases of overcrowding relieved during the year	... ..	37
(2) Number of persons concerned in such cases	...	191

From the foregoing tables it will be seen that the Housing Committee dealt with 107 houses under the Clearance, Closure and Demolition Sections of the Housing Act, 1936. This was a big advance on anything achieved in this direction since the end of the war. It is my opinion that in the light of the experience gained during the year, the resources of the Department are capable of dealing quite efficiently with double this number each year.

During the year the Housing Repairs and Rents Act, 1954 came into operation (30th July, 1954). The Act makes further provision for the clearance and re-development of areas of unfit housing accommodation and for securing or promoting the reconditioning and maintenance of houses. One cannot review all the provisions of the Act, but the following are noted :—

Section 1.

Local Authorities are required within one year of the passing of the Act to submit to the Minister details of their proposals for dealing with houses within the district of the authority which appear to be unfit for human habitation, and with any other houses within that district which are or in the opinion of the authority ought to be included in clearance areas.

Section 9.

This section sets out which matters the local authority shall have regard to when determining whether or not a house is unfit for human habitation.

Section 10.

This section allows for a rent increase, known as the “repairs” increase, subject to certain conditions being fulfilled.

Section 11.

Provides for the issue of certificates of disrepair where conditions set out in the above section are not fulfilled.

Much publicity was given to the question of rent increases and the issue of certificates of disrepair. It was expected that there would be a flood of applications for such certificates, but, in fact, this Council only issued 8 Disrepair Certificates during the year.

Below are set out the Council’s proposals with regard to unfit houses in their area, in the form required by the Minister.

Housing Repairs and Rents Act, 1954.

Total number of permanent dwellings in the local authority’s area	...	...	...	...	...	...	...	...	12,920
---	-----	-----	-----	-----	-----	-----	-----	-----	--------

Part 1. The total problem.

- (i) Estimated number of houses unfit for human habitation within the meaning of section 9 of the Housing Repairs and Rents Act, 1954, and suitable for action under section 11 or section 25 of the Housing Act, 1936 ... 2084
- (ii) Period in years which the Council think necessary for securing the demolition of all the houses in (i) ... 10 years

Part 2. Orders already made, etc.

(iii)	Number of houses in (i) in clearance areas and already covered by operative clearance or compulsory purchase orders or owned by the local authority ... ..	25
(iv)	Number of houses which are already in clearance areas and for which clearance or compulsory purchase orders have been submitted to the Minister but have not yet become operative ... ..	8

Part 3. Action in the first five years.

(v)	Number of houses which are already in clearance areas and for which clearance or compulsory purchase orders are to be made or which are to be purchased by agreement within the five years ... ..	Nil
(vi)	Number of houses which are to be included in clearance areas still to be declared and which within the five years will be owned by the local authority or will have been included in a clearance order or a compulsory purchase order submitted to the Minister ... ..	739
(vii)	Number of houses under (iii), (iv), (v) and (vi) to be patched (if necessary) and retained within the five years under section 2 of the Housing Repairs and Rents Act 1954, for temporary accommodation ... ..	Nil
(viii)	Number of houses under (iii), (iv), (v) and (vi) to be demolished in the five years ... ..	772
(ix)	Number of houses (including those already comprised in operative demolition orders) to be demolished in the five years as a result of action under section 11 of the Housing Act, 1936 ... ..	128

Houses Dealt with during the Year.

Ward	Address	Action Taken	No. of houses
Spen and Littletown.	33/45 Lower Lane, Gomersal, Nr. Leeds.	Housing Act 1936. Sec. 11. Individual Unfit Houses.	7
	317/319 Bradford Road, Littletown, Liversedge.	Housing Act 1936. Sec. 11. Individual Unfit Houses.	2
	78/88 Dewsbury Road, Cleckheaton.	Housing Act 1936. Sec. 11. Individual Unfit Houses.	6
	Well Street	Housing Act. Sec. 25.	13
	Clearance Area.		
Hightown and Hartshead.	310/314 Halifax Road, Hightown, Liversedge.	Housing Act 1936. Sec. 11. Individual Unfit Houses.	3
	101/103 Halifax Road, Hightown, Liversedge.	Dangerous Buildings. Informal action.	2
Scholes	886/896 Halifax Road, Scholes, Cleckheaton.	Housing Act 1936. Sec. 11. Individual Unfit Houses.	6
	13/19 Manor Street, Scholes, Cleckheaton.	Housing Act 1936. Sec. 11. Individual Unfit Houses.	4
	186 Scholes Lane, Scholes, Cleckheaton.	Dangerous Building.	1
		Informal action.	



Ward	Address	Action Taken	No. of houses
Norristhorpe and Roberttown.	8/18 Church Road, Roberttown.	Housing Act 1936. Sec. 11.	6
	106/118 Church Road, Roberttown.	Housing Act 1936. Sec. 11.	7
	6 Gordon Place, Roberttown.	Informal Action. Closure.	1
	210, 218, 222 & 226 Norristhorpe Lane, Norristhorpe.	Housing Act 1936. Sec. 12. Closing Orders.	4
Birkenshaw.	122/124 Drub, Gomersal, Nr. Leeds.	Housing Act 1936. Sec. 11.	2
	76/80 Birkenshaw Lane, Birkenshaw.	Housing Act 1936. Sec. 11.	3
	Drub Lane, Clearance Area.	Housing Act 1936. Sec. 25.	13
Oakenshaw and Hunsworth.	77/81 Raikes Lane, East Bierley.	Housing Act 1936. Sec. 11.	3
	Cringles Clearance Area	Housing Act 1936. Sec. 25.	8
Gomersal.	267 Oxford Road, Gomersal.	Informal Action. Closure.	1
Cleckheaton East.	1/4 Walker Street, Cleckheaton.	Housing Act 1936. Sec. 11.	4
	81 Northgate, Cleckheaton.	Housing Act 1936. Sec. 11.	1
	7/9 Brooke Street, Cleckheaton.	Housing Act 1936. Sec. 11.	2
	8 King Street, Cleckheaton.	Informal Closure.	1
	6 Canary Street, Cleckheaton.	Housing Act 1936. Sec. 12. Closure.	1
Cleckheaton West.	24/28 Moorbottom, Cleckheaton.	Housing Act 1936. Sec. 11.	3
	76/78 Westgate, Cleckheaton.	Informal closure.	2
	1 Lockwood Place, Cleckheaton.	Informal closure.	1
			<hr/> 107 <hr/>

### CONVERSION OF PRIVY MIDDENS.

During the year the Health Committee continued the scheme of grant aid to persons desiring to convert privy middens to water closets. The following table shows the grants sanctioned during the year :—

Applications granted	Total Estimated Cost £ s. d.	Council's Grant £ s. d.	No. of Privy Middens	No. of W.C's.
4	192 15 9	76 15 0	5	5

Since the beginning of the scheme the figures are as follows :—

Applications granted	Total Estimated Cost £ s. d.	Council's Grant £ s. d.	No. of Privy Middens	No. of W.C's.
143	9174 19 10	3446 12 10	254	260

It is estimated that 45 convertible privies remain.

## REFUSE COLLECTION, REFUSE DISPOSAL AND SALVAGE.

### A. Refuse Collection.

The collection service functioned well during the year and an efficient service was maintained. The Department was responsible for the collection of refuse from 13,883 premises.

### B. Refuse Disposal.

Disposal of refuse by controlled tipping continued at the Football Field, East Bierley, and the Quarry, Hartshead. The Rodent operative regularly inspects both tips and carried out any poison baiting necessary.

### C. Salvage.

During the year the Committee authorised the purchase of a mechanical elevator for loading waste paper bales. The old method of loading was irksome as each bale had to be lifted from floor level to a final height of 10 ft.—12 ft. It was also a waste of man power. Since the new baler has been in operation the number of men has been reduced by one, and the work made considerably easier.

### D. Public Cleansing Costing Return.

#### COST STATEMENT 1954/55.

Item	Particulars 1.	Collection 2.	Disposal 3.	Totals 4.
1.	REVENUE ACCOUNT Gross Expenditure :	£	£	£
	(i) Labour ... ..	8591	1046	9637
	(ii) Transport ... ..	6296	251	6547
	(iii) Plant, equipment, land and buildings ... ..	279	57	336
	(iv) Other items (including £—— paid to other local authorities.) ...	—	—	—
	(v) Total gross expenditure	15166	1354	16520
2.	Gross Income (including £—— received from other local authorities .. ...)	120	1682	1802
3.	Net Cost ... ..	15046	Cr. 328	14718
4.	Capital expenditure met from revenue (included above)	—	—	—
	<b>Unit Costs.</b>	s. d.	s. d.	s. d.
5.	Gross cost per ton, labour only	16 1	1 11	18 0
6.	Gross cost per ton, transport only ... ..	11 10	6	12 3
7.	Net cost (all expenditure) per ton ... ..	28 5	2 6	30 11
8.	Net cost per 1,000 population	£ 409	£ 9	£ 400
9.	Net cost per 1,000 premises ...	1083	Cr. 23	1060

### Salvage and Trade Refuse. Analysis of income and tonnage.

					Income (Included in Item 2) £	Tonnage Collected Tons
Salvage :						
(a)	Kitchen Waste	...	...	...	—	—
(b)	Scrap Metal	...	...	...	51	1
(c)	Waste Paper	...	...	...	1507	220
(d)	Other Salvage	...	...	...	62	6
					<hr/>	<hr/>
(e)	...	...	...	...	1620	227
					<hr/>	<hr/>
Trade Refuse					182	203

### VERMINOUS PREMISES.

During the year 3 private houses were found to be infested with vermin. A total of 285 visits were made to verminous or unclean premises and to prospective Council House tenants.

#### Rodent Control.

During the year 1,136 visits were made with the following results :

1.	No. of properties inspected	...	...	...	...	311
2.	No. of rat infestations found—					
	Major	...	...	...	...	20
	Minor	...	...	...	...	162
	No. of mice infestations found	...	...	...	...	67
	Total number of infestations	...	...	...	...	249
3.	No. of properties treated by Local Authority	...	...	...	...	237
4.	No. of notices served to carry out treatment	...	...	...	...	Nil
5.	No. of notices served for structural alteration	...	...	...	...	3

#### Sewer Treatment.

Two maintenance treatments were carried out during the year, in March and October. In the former, 123 manholes were pre-baited with bread mash on two consecutive days, and the 38 which shewed takes were boison-baited on the 3rd day with bread mash containing arsenic. In October, 314 manholes were pre-baited on consecutive days with sausage rusk and 43 which shewed takes were poison-baited on the 3rd day with sausage rusk containing zinc-phosphide.

### OFFENSIVE TRADES.

There are four offensive trades registered in the district.

One Tripe Boiler.

Two Soap Boilers.

One Fat Melter and Fat Extractor.

6 inspections were made and no nuisance found.



SMOKE ABATEMENT.

112 observations of 30 minutes' duration were taken during the year. Of these 18 were unsatisfactory.

Contraventions over permitted three minutes black smoke in 30 mins.

Up to 1 min.	1 to 2 mins.	2 to 3 mins.	3 to 4 mins.	4 to 5 mins.
1	3	3	5	2
More than 5 mins.				
4				

The instruments for the measurement of atmospheric pollution throughout the area are sited as follows :—

Site.	Apparatus.
Marsh Depot, Rawfolds, Cleckheaton	1 Deposit Gauge and 1 Lead Peroxide instrument.
Elm Bank, Cleckheaton	... 1 Automatic Smoke Filter.
North Bierley Hospital, Cleckheaton	1 Deposit Gauge—1 Lead Peroxide instrument.
High Rising, Gomersal	... ..
Millbridge Upper School	... ..
Liversedge Tennis Club	... ..

The following table shows the deposit throughout the area for each month of the year :—

		Total solids per square mile in tons				
		Marsh Depot	North Bierley	High Rising	Millbridge School	Tennis Club
January	...	12.98	11.69	10.74	15.05	10.80
February	...	17.45	10.77	12.02	12.06	10.27
March	...	20.75	14.16	13.30	24.72	16.10
April	...	13.24	11.66	9.12	17.33	11.62
May	...	4.62	5.30	3.56	4.71	3.59
June	...	16.24	8.76	7.37	15.30	7.41
July	...	17.99	7.05	7.41	12.69	7.84
August	...	11.02	10.83	12.58	17.26	12.44
September	...	8.93	9.29	7.73	15.86	10.36
October	...	13.55	8.26	8.52	8.96	10.74
November	...	14.15	10.41	7.67	12.98	9.91
December	...	35.07	15.31	17.95	48.55	12.58
Average	...	15.49	10.29	9.83	17.12	10.30

SHOPS ACT.

No. of shops	...	...	...	...	...	...	...	444
Food Shops	...	...	...	...	...	...	...	300
Other Shops	...	...	...	...	...	...	...	144

110 inspections were made during the year and 13 minor contraventions were found. These were complied with during the year.

## PUBLIC CONVENIENCES.

The accommodation below is provided in 15 conveniences throughout the area :—

Females.	Males.
29 water closets.	19 water closets and urinal accommodation.

One workman is engaged full-time in cleaning these conveniences. The buildings are in the main, modern structures designed specifically for the purpose. It is necessary, however, to draw attention to the appalling amount of wanton damage done to doors, windows, fittings and lighting fixtures by irresponsible members of the public.

Efforts were made during the year to obtain sites for three new public conveniences. One site was approved in East Bierley, but many difficulties were encountered in obtaining sites in those parts of Hightown and Roberttown which the Sub-Committee had chosen as most suitable. The estimated cost of the three proposed conveniences was £2,900.

## **APPENDICES.**

- A.** Vital Statistics of the Spenborough Urban District for 1945-1954.
- B.** Infantile and Maternal Mortality Rates and Stillbirth Rates of Spenborough for the past twenty years.
- C.** Notifications of Infectious Disease in Spenborough Urban District, 1931-1954.
- D.** Adoptive Acts in force in the District.  
Byelaws in force in the District.
- E.** Clinic and Treatment Centres.
- F.** Staff of the Health Department.



VITAL STATISTICS OF THE SPENBOROUGH URBAN DISTRICT FOR 1945-54.

Year	Popu- lation estimated to middle of each year	Births		Total Deaths registered in the District		Trans- ferable Deaths of residents not registered in the District	Trans- ferable Deaths of non- residents registered in the District	Net Deaths belonging to the District			
		Number	Rate	Number	Rate			Under 1 year		At all ages	
								Number	Rate per 1000 births		
											Number
1945	33780	471	13.9	312	9.2	8	124	22	46.7	428	12.7
1946	35400	646	18.2	348	9.8	12	184	35	54.2	520	14.7
1947	35930	756	21.0	298	8.3	5	154	23	30.4	447	12.4
1948	36640	646	17.6	322	8.8	4	145	27	41.6	463	12.6
1949	36760	579	15.7	368	9.8	11	152	25	43.0	509	13.6
1950	37030	543	14.7	407	10.9	22	139	14	25.8	524	14.1
1951	36840	503	13.6	425	11.5	27	139	16	31.8	537	14.6
1952	36860	551	14.8	397	10.8	28	155	15	27.2	524	14.2
1953	36760	507	13.8	394	10.7	12	109	13	25.6	491	13.4
1954	36760	446	12.1	366	10.0	11	153	17	38.1	508	13.8

Area of District in Acres (Land and Inland Water)	...	...	8253
Total Population at all ages (Census 1951)	...	...	36977
Estimated Population by Registrar General (Mid. 1954)	...	...	36760
Number of Inhabited Houses	...	...	13047

## APPENDIX B.

**INFANT AND MATERNAL MORTALITY RATES AND STILLBIRTH  
RATES OF SPENBOROUGH FOR THE PAST TWENTY YEARS.**

Year	Births	Infants		Mothers		Stillbirths	
		Deaths	Rate	Deaths	Rate	Number	Rate
1935	378	15	39	2	7.9	20	50.3
1936	374	26	70	Nil	—	28	69.6
1937	400	38	93	5	12.2	16	39.0
1938	462	30	66	Nil	—	20	40.0
1939	484	18	37	Nil	—	19	38.1
1940	495	20	40.4	5	9.6	25	48.1
1941	496	19	38.3	2	3.8	18	35.0
1942	503	27	53.7	Nil	—	15	28.9
1943	472	16	33.9	2	4.0	22	44.5
1944	585	28	47.9	Nil	—	11	18.4
1945	471	22	46.7	1	2.1	14	28.0
1946	646	35	54.2	Nil	—	15	22.7
1947	756	23	30.4	Nil	—	26	33.2
1948	646	27	40.5	1	1.5	19	28.6
1949	579	25	43.0	Nil	—	15	25.2
1950	543	14	25.8	1	1.78	20	35.5
1951	503	16	31.8	Nil	—	15	29.0
1952	551	15	27.2	Nil	—	9	16.1
1953	507	13	25.6	Nil	—	11	21.2
1954	446	17	38.1	1	2.2	12	26.2

NOTIFICATIONS OF INFECTIOUS DISEASE in Spenborough Urban District, 1931-1954.

Year	Smallpox	Polio myelitis and Polio encephalitis	Enteric Fever	Scarlet Fever	Diphtheria	Pneumonia	Cerebro-Spinal Fever	Erysipelas	Malaria	Puerperal Fever	Puerperal Pyrexia	Ophthalmia Neonatorum	Chicken Pox	Respiratory Tuberculosis	Other Tuberculosis	Measles	Whooping Cough	Other Diseases	Totals
1931				83	28	101		6		2	4	1	45	20	11			1	302
1932			3	209	9	59		9		2	2	2	291	22	13				621
1933			1	111	59	60		6		1		1	57	32	7				335
1934				110	59	23		11		1		3	81	18	8			1	317
1935				119	71	34		8		1	2	6	83	5	12				340
1936				70	21	25		8		2	4	1	108	16	4				259
1937				65	21	37		5			1	3	182	20	7				341
1938				117	44	31		12			1	2	315	29	11			1	563
1939			3	51	25	20		17			3	3	100	15	4			15	256
1940			2	68	41	39		8			6	5	81	24	9	911	79		1273
1941			4	43	38	18		10			4	4	362	16	10	98	275		882
1942				180	27	30		3			2	1	155	19	14	440	99	9	979
1943				257	42	40		12			2	1	267	23	13	521	245	15	1438
1944				110	32	18	1	8	1		1	1	532	15	9	195	102	1	1026
1945				89	31	33	2	9	2				130	14	10	712	15	3	1050
1946				43	29	27	1	1	1	1		2	201	28	16	63	272	1	686
1947		9		27	4	20	1	4	1		1	3	215	23	17	408	137	9	879
1948				68	5	34		6			1		175	15	12	519	144	6	985
1949		15		44		30		14		1	1	1	145	25	10	151	151	5	595
1950		4		22		32		8		1			230	23	4	453	128	32	938
1951		6		37		68		6		1			471	16	14	368	219	10	1216
1952		2		68		18		11			3		147	20	4	198	146	9	626
1953		5		56		48		7			1		443	11	8	769	124	31	1502
1954				55	1	24		7					214	17	9	74	92	25	519



# APPENDIX D.

## ADOPTIVE ACTS IN FORCE IN THE DISTRICT.

Statutes.	Date of coming into operation.
The Public Health Acts Amendment Act, 1907 (Sections 15, 16, 17, 18, 20, 21, 22, 28, 29, 30, 31, 32 and 33 and Part VI) ... ..	25th April 1912
The Public Health Acts Amendment Act, 1890 (Sections 34, 35, 37, 38, 39, 40, 42, 43, 44, 45 and 46) ... ..	1st April 1915
The Private Street Works Act 1892 ... ..	1st April 1915
The Public Libraries Act 1892 ... ..	1st April 1915
The Public Health Acts Amendment Act 1907 (Section 19) ... ..	22nd March 1921
The Public Health Act 1925 (Part II except Sections 15 and 20) ... ..	1st December 1926
The Public Health Acts Amendment Act 1907 (Section 95) ... ..	31st January 1927
The Public Health Acts Amendment Act 1907 (Section 86) ... ..	11th February 1952
West Riding County Council (General Powers) Act 1951 (Part IV—Section 36, Part V, Part VI, Part VII, Part VIII—Sections 75 and 76, Part XI, Part XII, Part XIV—Section 120) ... ..	1st April, 1953

## BYELAWS IN FORCE IN THE DISTRICT.

Subject.	Date of Confirmation.
In operation within the whole of the Urban District :	
Building Byelaws ... ..	15th June 1939
Hackney Carriages ... ..	17th February 1948 (varied—7th Dec. 1951)
Handling, Wrapping and Delivery of Food	24th March 1950
The Prevention of Waste, Undue Consumption, Misuse or Contamination of Water ... ..	20th March 1952
Hairdressers and Barbers ... ..	1st May, 1953
In operation within the Urban District excluding Birkenshaw, Hunsworth, and parts of Hartshead and Clifton :	
New Streets ... ..	15th March 1927
Public Slaughter Houses ... ..	7th March 1927
Wireless Apparatus ... ..	15th May 1930
Smoke Abatement ... ..	26th November 1928

# CLINIC AND TREATMENT CENTRES.

## APPENDIX E

Name.	Situation.			When Open.
Child Welfare Clinic	...	Valley Road, Littletown, Liversedge	...	Tuesdays 2—4 p.m.
Do.	...	Old Lane Methodist Sunday School, Birkenshaw	...	Tuesdays 2—4 p.m.
Do.	...	Elm Bank, Cleckheaton	...	Wednesdays 2—4 p.m.
Do.	...	Temperance Hall, Scholes, Cleckheaton	...	2nd Thursday in the month 2—4 p.m.
Do.	...	Methodist Sunday School, Roberttown, Liversedge	...	3rd Thursday in the month 2—4 p.m.
Do.	...	Public Hall, Gomersal	...	Fridays (fortnightly) 2—4 p.m.
Combined Ante-Natal and Post-Natal Clinics	...	Valley Road, Littletown, Liversedge	...	Mondays 2—4 p.m.
Do.	...	Old Lane Methodist Sunday School, Birkenshaw	...	Wednesday 2—4 p.m.
Do.	...	Elm Bank, Cleckheaton	...	Thursday 2—4 p.m.
Ultra Violet Light Clinic	...	Valley Road, Littletown, Liversedge	...	Tuesdays 9.30 a.m.—12 noon
Do.	...	Valley Road, Littletown, Liversedge	...	Saturdays 9.30—11.30 a.m.
School Clinic	...	Elm Bank, Cleckheaton	...	Mondays 9.30 a.m.—11.30 a.m.
Paediatric Clinic	...	Elm Bank, Cleckheaton	...	Mondays (fortnightly) 9 a.m.—12 noon
Ophthalmic Clinic	...	Elm Bank, Cleckheaton	...	Mondays 1 p.m.—4 p.m.
Do.	...	Elm Bank, Cleckheaton	...	Tuesdays 1 p.m.—4 p.m.
Chiropody Clinic	...	Elm Bank, Cleckheaton	...	Thursdays 9 a.m.—12 noon
Do.	...	Valley Road, Littletown, Liversedge	...	Fridays 1.30—4 p.m.
Speech Therapy Clinic	...	Valley Road, Littletown, Liversedge	...	Thursdays 10 a.m.—12 noon and 1 p.m.—4 p.m.
Physiotherapy Clinic	...	Elm Bank, Cleckheaton	...	Fridays 9 a.m.—12 noon and 2 p.m.—4 p.m.
Dental Clinic	...	Elm Bank, Cleckheaton	...	Daily by appointment
Chest Clinic	...	Knowler Hill, Liversedge	...	Fridays 10 a.m.—12 noon
Young Mothers' Club	...	Elm Bank, Cleckheaton	...	Wednesdays (fortnightly) 7.30 p.m.
Old People's Chiropody Clinic	...	Elm Bank, Cleckheaton	...	Tuesday 1.30 p.m.—4 p.m.
(Run by Spenborough Old People's Welfare Committee)	...			
Family Planning Clinic (Run by Spenborough and District Family Planning Association)	...	Valley Road, Littletown, Liversedge	...	Mondays 6.30 p.m.

**STAFF OF THE HEALTH DEPARTMENT**

**Medical Staff.**

WILLIAM M. DOUGLAS, M.B., Ch.B., D.P.H.  
Medical Officer of Health.  
Divisional Medical Officer.

**Sanitary Inspector's Staff.**

J. F. TEMPLEMAN, M.Inst.P.C., M.S.I.A., Chief Sanitary Inspector, Cleansing Officer and Market Superintendent. Testamur of the Institute of Public Cleansing. Certificate of the Royal Sanitary Institute for the Inspection of Meat and Other Foods.

**Additional Sanitary Inspectors.**

G. M. GILMORE, A.R.San.I., M.S.I.A., Sanitary Inspector's Certificate of the Royal Sanitary Institute.

C. KELLY, M.S.I.A., Certificate of the Royal Sanitary Institute and Sanitary Inspector's Joint Board. Certificate of the Royal Sanitary Institute for the Inspection of Meat and Other Foods.

R. FARNWORTH, Certificate of the Royal Sanitary Institute and Sanitary Inspector's Joint Board.

L. SCHOFIELD, M.S.I.A., Certificate of the Royal Sanitary Institute and Sanitary Inspector's Joint Board.  
(Commenced 1st June, 1954).

R. BURFIELD, Certificate of the Royal Sanitary Institute and Sanitary Inspector's Joint Board.  
(Commenced 19th July, 1954).

Mrs. M. LEAR, Clerk, Sanitary Inspector's Section.  
(Commenced 18th October, 1954).

**Medical Staff.**

ELEANOR M. WHITEHEAD, M.B., Ch.B., Assistant County Medical Officer.

MARGARET M. BREARLEY, M.B., Ch.B., Assistant County Medical Officer. (Resigned 6th April, 1954).

GEORGE CUST, M.B., Ch.B., Assistant County Medical Officer.  
(Commenced 6th September, 1954).



### **Clerical Staff.**

Mr. P. MARSHALL, D.P.A., Chief Clerk.  
Mr. H. R. COX.  
Miss G. M. HARTLEY  
Mrs. M. HAYNES. (Commenced 4th August, 1954).  
Miss N. HOLLIDAY. (Commenced 11th October, 1954).  
Miss A. JOHNSON. (Commenced 13th December, 1954).  
Mrs. M. MYERS. (Resigned 31st October, 1954).  
Mrs. D. M. ROBINSON. (Resigned 30th March, 1954).  
Mrs. V. THEWLIS.  
Mrs. E. M. THOMIS. (Commenced 12th April, 1954).  
Mrs. J. M. TOULSON. (Resigned 30th September, 1954).

### **Health Visitors (Part-time School Nurses).**

Miss D. DAY, S.R.N., S.C.M., H.V. Cert. of R.S.I., Senior Health Visitor.  
Mrs. D. PICKUP, S.R.N., S.C.M., H.V. Cert. of R.S.I.  
Mrs. M. RAYNER, S.R.N., S.C.M., H.V. Cert. of R.S.I.  
Miss M. HARTLEY, S.R.N., S.C.M., H.V. Cert. of R.S.I.  
Miss M. GREENHOUGH, S.R.N., S.C.M., H.V. Cert. of R.S.I.  
Miss L. WILLOUGHBY, D.N., S.R.N., S.C.M., H.V. Cert. of R.S.I.  
(Leave of absence from 21st September, 1954).  
Miss M. J. TRENBATH, S.R.N., S.C.M., H.V. Cert. of R.S.I.  
Miss C. JANSE, S.R.N., S.C.M., H.V. Cert. of R.S.I.  
Miss A. SEELIG, S.R.N., S.C.M., H.V. Cert. of R.S.I.  
Miss D. A. LEAKE, S.R.N., S.C.M., H.V. Cert. of R.S.I.  
(Commenced 16th December, 1954).

### **Assistant Health Visitors (Temp. School and Clinic Nurses).**

Mrs. G. MARSHALL, S.R.N.  
Mrs. E. I. SMITH, S.R.N.

### **Midwives.**

Miss E. J. POTTS, S.C.M. (Resigned 20th August, 1954).  
Mrs. D. M. GOMERSALL, S.R.N., S.C.M.  
Miss L. M. THOMPSON, S.R.N., S.C.M.  
Miss B. HEPPELSTON, S.R.N., S.C.M.

### **District Nurses.**

Miss F. E. GAMBLE, S.R.N., Queen's Nurse.  
Miss F. METCALFE, S.R.N., C.M.B., Queen's Nurse.  
Miss E. BIRD, S.R.N., S.C.M., Queen's Nurse.  
Miss E. PHILLIPS, S.R.N., Queen's Nurse.  
Mrs. E. SAYLES, S.R.N., S.C.M.  
Miss W. SPENCER, S.R.N., S.C.M., H.V. Cert. of R.S.I. (Queen's Nurse).  
Miss M. LAYCOCK, S.R.N., S.C.M.  
Miss B. D. SHARP, S.R.N., S.C.M.

**Dental Staff.**

Mr. H. TAYLOR, L.D.S.,  
Miss K. COLLETT, Dental Attendant.

**Moorend Day Nursery,**

Mrs. W. M. BROOKE, S.R.N., Matron.	} Left October, 1954.
Miss K. ARMITAGE, S.E.A.N., Deputy Matron.	
Mrs. M. A. RYAN, Warden.	
Miss E. DRAKE, Nursery Nurse.	
Mrs. K. M. HOLMES, Nursery Assistant.	
Miss R. BROOKE, Nursery Nurse.	
Mrs. P. J. HARRISON, Nursery Nurse.	
Miss J. THORNTON, Nursery Assistant.	

**Part-time Staff.**

Dr. M. M. MacTAGGART, M.P.S., B.Ed., Ph.D., County  
Psychologist.

Mr. B. D. VAINES, M.Ch.S., Chiropodist.

Miss D. RENDER, M.C.S.P., Physiotherapist.

Mr. L. WITTELS, M.D. (Vienna), D.O., Consultant Ophthal-  
mologist.

Miss L. M. BALL, Home Teacher of Mental Defectives.  
(Resigned 30th June, 1954).

Mrs. M. M. De LA COUR, Mental Health Social Worker.

Mrs. S. M. KEARNEY, Speech Therapist. (Resigned 11th  
December, 1954).

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